

PROCEEDINGS OF THE FIRST FEMINIST  
FAT ACTIVISTS' WORKING MEETING

April 18-20, 1980

New Haven, CT.

Report prepared by Judith A. Stein

Illustrated by Beryl-Elise Hoffstein

August 5, 1980

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(Part One of Two.)

(pages 1-21.)

## INTRODUCTION

The First Feminist Fat Activists Working Meeting was held on April 18-20, 1980 in the New Haven, Connecticut area. As the name implied, this was the first time that feminists who were activists in the Fat Liberation Movement met. We had many goals: personal support and energizing for women who were working in isolation; information gathering, and most important, developing a network among feminists who were doing Fat Liberation work.

The meeting was conceived and organized primarily by two women: Aldebaran (Vivian Mayer) from New Haven, Connecticut, and Judith Stein, from Cambridge, Massachusetts. The meeting was publicized through the feminist press, word of mouth, lists of potential attendees that Aldebaran had compiled through Fat Liberator Publications, and women who were part of the Fat Dykes network at the 1979 Michigan Womyn's Music Network.

We planned our meeting to coincide with the New Haven Women's Health Conference; and we requested time to present Fat Liberation information at that event. Fat Liberation presented three workshops, and the Sunday morning keynote panel at the Conference. In addition, we had a literature table with written resources on Fat Liberation.

Saturday, April 19, was a meeting for fat activists only, held separately from the Women's Health Conference. We met in the home of one of the women attending, and spent the day and evening together.

These proceedings are a compilation of hurriedly-written notes at our working meetings, and assigned notes from the Fat Liberation workshops at the New Haven Women's Health Conference. In addition, several of the workshop facilitators wrote workshop reports about the sessions at the larger Conference. The quality of the notes and reports is uneven - for some meetings there were carefully written reports, for others there were only brief notes. I have compiled all of the information which was sent to me about both the Fat Activists Working Meeting, and the Fat Liberation workshops at the New Haven Women's Health Collective. I have done very minimal editing, and tried to include any of the notes which I could understand.

Three of the speeches presented at the keynote panel of the Women's Health Conference were transcribed by the Boston Women's Health Book Collective (Our Bodies OurSelves) and will be included, along with other Fat Liberation literature, in their next Women's Health Packet. This is an information and literature packet which they send to several hundred women's health groups throughout the U.S. and abroad. Their support for this work has been of great help, and I am hopeful that they can help Fat Liberation reach many many more women than we could with our own limited resources.

I welcome feedback about these proceedings -- write me care of Fat Liberator. I only hope that women reading them are encouraged to think more about Fat Liberation information, and that the Fat Liberation movement will grow and spread until no more women suffer from dangerous and harmful diets, or from medical butchery in an attempt to become thin.

In Fat Solidarity,

Judith Stein August 1, 1980

AGENDA

First Feminists Fat Activists Working Meeting

April 18-20, 1980

FRIDAY, April 18

evening: Arrival, Ruth Silverman's home; snacks & informal socializing.

SATURDAY, April 19

9:45 - Review tentative agenda.  
11:00 Introductions; why we're here.  
What are our priorities for discussion.  
Meals arrangements/work to be shared.

11:00 - Resource sharing.  
11:45 What written/visual resources do we have available to share with other feminist fat activists?

11:45- Two workshops:  
12:25 Building support in the feminist community  
Fat women as disabled women

12:25 - Two workshops:  
1:00 Organizing fat women  
Employment discrimination against fat women

2:30 - Two workshops:  
3:45 Lesbian caucus  
Heterosexual women's meeting.

4:00- Third working meeting: Full group  
5:30 Networking: what are our goals  
(fantasy brainstorm of projects/goals for Fat Liberation Movement)

5:30- Delicious spaghetti dinner!  
7:00

7:30 - An Evening of Fat Women's Culture  
10:00

AGENDA (continued)

First Feminist Fat Activists Meeting

SUNDAY, April 20

WORKSHOPS AT NEW HAVEN WOMEN'S HEALTH CONFERENCE

9:30 - 10:15      Keynote panel: PANEL ON FAT WOMEN'S LIBERATION

10:30 - 12:00      Body Image

1:30 - 3:00      Anorexia and Compulsive Eating

3:30 - 5:00      Fat Women's Health Care Issues



PARTICIPANTS

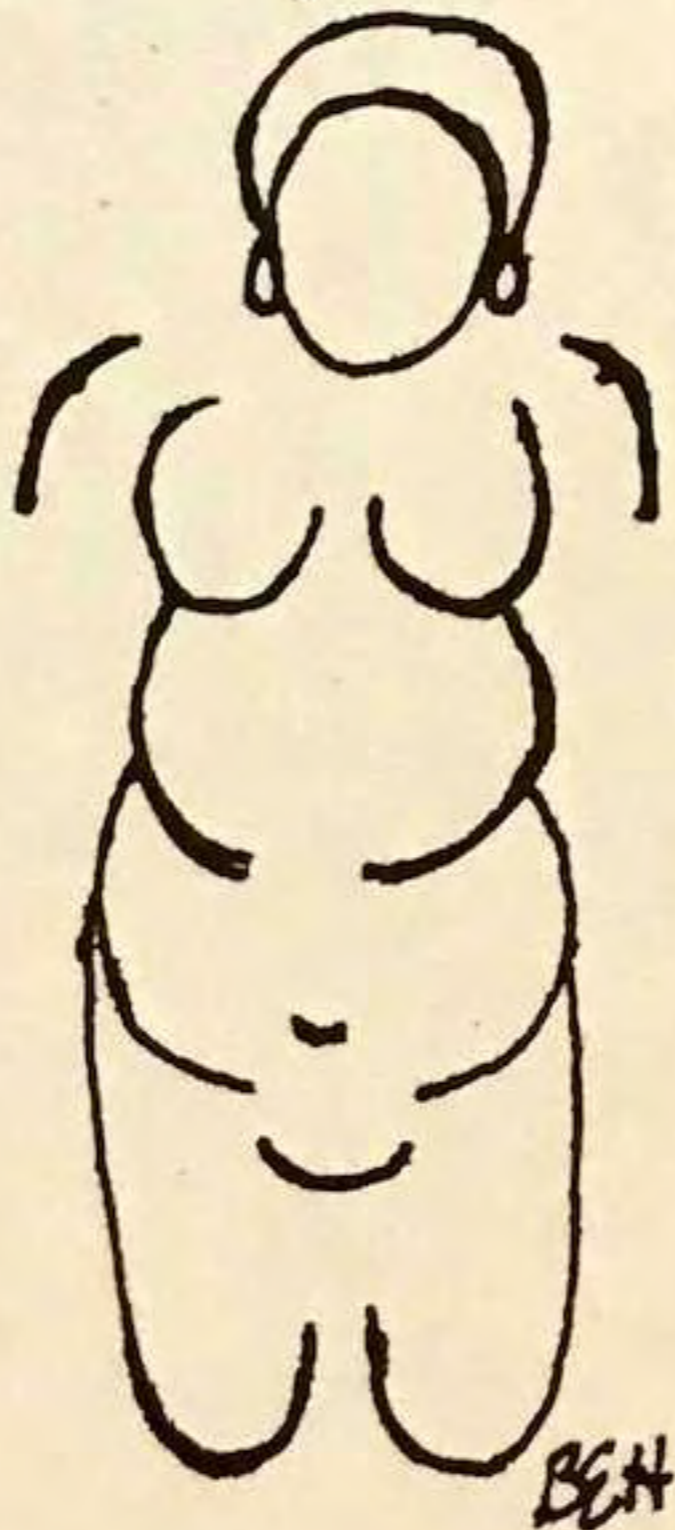
First Feminist Fat Activists Meeting

New Haven, CT.

April 18-20, 1980

Aldebaran	Bethany, CT.
Kate Allen	Somerville, MA.
Nancy Bell	Billerica, MA.
Cindy Cooper	Atlanta, GA.
Diane Denne	Minneapolis, MN.
Barbara Donahue	<b>Woodhaven</b> , N.Y.
Marcia DuVall	Somerville, MA.
Judy Freespirit	Oakland, CA.
Judy Gage-O'Brien	Forestdale, MA.
Beryl-Elise Hoffstein	Somerville, MA.
Elly Janesdaughter (Schwartz)	Cambridge MA.
Kelly	Somerville, MA.
Diane Rubinstein	Brooklyn, N.Y.
Karen Scott-Jones	New Haven, CT.
ReaRae I. Sears	Somerville, MA.
Ruth Silverman	Hamden, CT.
Judith Stein	Cambridge, MA.

Self Portrait #1



FAT WOMEN ACTIVISTS' STATEMENT OF PURPOSE

(Written on the occasion of the  
New Haven Women's Health Weekend, 1980)

We are meeting:

- To support each other in work that has previously been isolated.
- To strategize the development of the fat women's liberation movement.
- To affirm our identity with the women's health movement.
- To raise the issue of fat women's oppression as an important feminist issue which has hitherto been neglected.
- To gain support for our struggle from other feminist health activists.

Among fat activist women there are differences of opinion on a variety of issues. However, the following are points with which most generally agree:

1. TO BE HEALTHY, WOMEN MUST HAVE CONTROL OVER THEIR OWN BODIES. This involves positive self-image, knowledge of one's body, and the political and personal power to act on that knowledge.
2. FEAR OF GETTING FAT OR FEAR OF GETTING FATTER is drummed into women by our sexist socialization. This keeps us preoccupied with food and in competition with each other. We are kept vulnerable to manipulative practices of the carcinogenic diet foods and weight loss industry. Our self-image becomes that of an invalid, dependent on doctors and therapists for daily well-being.
3. HEALTH IS AN ISSUE FOR ALL OPPRESSED PEOPLE, since the conditions of oppression--discrimination, poverty, stress--promote illness. We see our oppression as part of the systematic oppression of women, Lesbian and gay people, people of color, and poor and working people.
4. HEALTH IS PARTICULARLY CRUCIAL TO FAT WOMEN, BECAUSE FAT OPPRESSION DAMAGES OUR HEALTH IN CERTAIN SPECIFIC WAYS.
  - 4.1 Malnutrition--from chronic dieting, and the sugar cravings and food binges that are often the result of prolonged calorie deprivation. Contrary to stereotype, fat women tend to diet longer and harder than other women.
  - 4.2 Repeated dieting--increases the risk of most diseases associated with being fat: heart attacks, hypertension, diabetes, kidney disease, etc. Whether these illnesses would be endemic in fat people who do not diet is unknown, since virtually all fat people studied by medical researchers are chronic, repeat dieters. However, the few studies that have been made of healthy, long-lived fat people find that they never dieted, and they generally live in ethnic communities where fatness is favorably regarded.

Reducing diets have a long-term failure rate of 95-99%. This well-documented finding has been suppressed by both medical authorities and the reducing industry. Consequently, fat people, seeking personal escape from their oppression, are locked into a practice that is painful, usually futile, and extremely destructive to their health.

- 4.3 Lack of exercise--shame over one's body makes exercise unpleasant. Fat people who do assert their right to athletics, dance, bicycling, etc. in public often find they face public harrassment.
- 4.4 Surgical mutilation--jaw-wiring, gastric stapling, intestinal bypass surgery. These procedures are painful, expensive, with high rates of complication and death. At least 80% of the people who seek such "cures" are women--a reflection of the great suffering sexism adds to fat oppression. We demand that these medical procedures be seen for what they are--atrocities.
5. BLAME THE VICTIM POLITICS are based on the claim that fat people make themselves fat by "overeating." In fact, calorie intakes of fat and slim women fall within exactly the same range. Researchers have not found any significant, reliable difference between fat and slim women's nutrient intake or eating styles, either. This information has been so thoroughly suppressed and distorted that even fat women who eat somewhat less than the average slim woman describe themselves as "eating too much."
6. THE CLAIM THAT FAT IS UNHEALTHY is used by medical authorities to legitimize their power over people's nutrition, to provide a legal rationale for discrimination against fat people, and to protect the profits of the weight loss industry. Even if this claim were true, it makes no sense to "solve" the problem with a treatment 1-5% likely to produce permanent weight loss and 95-99% likely to increase the risk of illness and death.
7. THE SUPPRESSION OF INFORMATION ABOUT FAT PEOPLE'S HEALTH AND NUTRITION IS A MAJOR POLITICAL PROBLEM.
8. HEALTH FOR FAT PEOPLE DEPENDS ON THE SAME CONDITIONS AS HEALTH FOR OTHER PEOPLE: good nutrition, exercise, enjoyment, a clean environment, peace-of-mind, etc. Many people believe that under such conditions no one would be fat. This belief is on a par with the excuse some activists make for refusing to support gay liberation: that, in the absence of capitalism (or sexism, etc.) no one would be gay. We reject all such beliefs that attempt to invalidate human differences.
9. WE SUPPORT FAT WOMEN'S EFFORTS TO RECOVER/DISCOVER/LIBERATE INFORMATION ABOUT FAT BODIES AND HEALTH. We affirm our experience and ethnic traditions as valid sources of such information. Cultures in which fatness was approved of (such as Hawaii, Polynesia, Arabia) developed fat aesthetics, athletic and dance forms, massage techniques, etc., to promote enjoyment and health.
10. WE SUPPORT THE STRUGGLE AGAINST ECONOMIC AND POLITICAL PRACTICES THAT CREATE MALNUTRITION AND HUNGER IN THE USA AND THROUGHOUT THE WORLD. Good nutrition and health requires that people have real control over their food supply.

c/o Fat Liberator Publications  
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Minneapolis, MN 55407

NOTES FROM: THE FIRST FEMINIST FACT ACTIVISTS WORKING MEETING

The following are reports based on notes taken at the working meetings which took place Saturday, April 19, 1980. These reports represent the outline of discussions which took place among fat activists.

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Organizing Fat Women

Notes from Fat Activists Working Meeting

This meeting was a short (25 minute) opportunity for fat activists to brainstorm about ways to reach fat women with Fat Liberation information. The following organizing ideas and tactics were presented & responded to:

- one-to-one outreach, conversations with friends, co-workers etc.
- limited duration consciousness-raising groups. Could be done through area women's centers. Could use NOW's C-R group guidelines, focussed on feelings and experiences of being fat.
- 1st Fat Underground group came out of women's therapy "problem solving" group. Woman who was part of that was amazed that politicization came out of therapy group.
- Discussion about current trends that can be unconscious or hidden dieting -- "Health Foods" can be a euphemism for dieting, as can "cutting sugar out of life" -- overt reason is towards better health, hidden reason is as diet, or way to lose weight.

Women present these options in groups, and it is important to expose what is really going on without denying women their reality -- Woman with past experience in NAAFA (National Association to Aid Fat Americans -- a liberal, "civil rights" type group), said that compulsive eating and dieting were the most explosive issue in that group; that every woman she met through NAAFA dieted.

- It is important in groups to find topics of conversation that women can relate to which help identify issues of fat oppression -- some good ones are clothes, and chairs and seating in public and private places. Focussing on fat oppression can be a good "trust grabber".



Fat Women as Disabled Women

(notes from the working meeting)

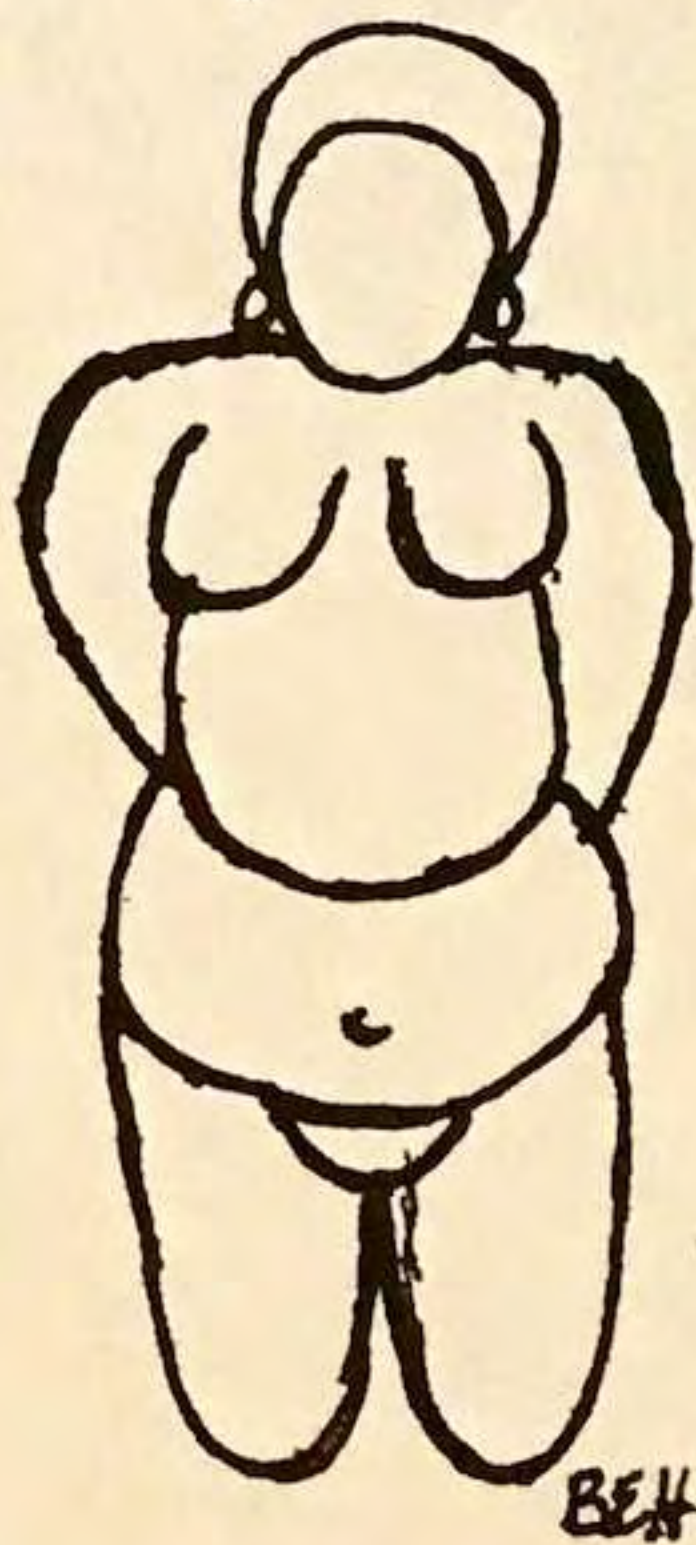
Many women do not want to be "labeled" disabled because they do not want to be perceived as "less than."

Within other disabled groups, this same idea exists -- some blind people say that they are blind, but not that they are disabled. Some deaf people say that they have a communication problem, not that they are disabled.

HEW 504 (regulation from Dept. of Health, Education and Welfare) states that it is illegal to discriminate against someone who is disabled, or is perceived to be disabled (as fat people are!). The Office of Civil Rights hears complaints under this regulation. It is not yet well-established that fat people are covered by HEW 504, but certainly, fat people are often perceived (perceive ourselves) as having access problems (i.e. a disability -- for example, lack of free mobility on narrow-aisled busses and subways...).

Disabled community has become increasingly militant -- fat liberationists could work with them for our mutual concerns.

Self Portrait #2



Organizing Support for Fat Liberation in the Feminist Community

Notes from workshop at working meeting of Fat Activists.

These notes are from a short (20 minute) working meeting among feminist fat activists who wanted to present some ideas about being fat liberation activists within a larger women's community. What follows is a presentation of the ideas presented. The short time of the workshop prevented further discussion.

- To start, positive images of fat women are needed because they will reach people emotionally -- where a genuine change of attitude can occur.
- Susie Orbach's book (Fat is a Feminist Issue) rips off feminist rhetoric but comes to the same conclusions as the culture as a whole -- that fat women should and do want to be thin. But a lot of feminists are drawn to it by the title, and because it is the most sympathetic book that is mass-marketed. They don't see Fat Liberator materials -- not mass marketed like Orbach's book.
- A resource list of non-fatophobic doctors would be a real service to women as would a group which discussed compulsive eating without having weight loss as a (hidden) agenda item.
- Tee Corrine is a photographer who has taken beautiful erotic photographs of women, including a few of fat women. More images like that in feminist and lesbian/feminist media would help.
- It would be good to see fat women defined as workers, etc., not just by our bodies.
- We need to create a fat woman's aesthetic -- there are a very few positive images of fat women available. We need to support these and push for more. (In addition to Tee Corrine, whose pictures of fat women are not easily available, there is a San Francisco artist, Judith Masur, who prints notecards which include very fat women portrayed very beautifully.)

Fat Women and Employment

Notes from a meeting at the Fat Activists Working Meeting.

- In Philadelphia, "morbidly obese" is the only category related to fatness which is covered under disability laws (i.e. illegal to discriminate on this basis in certain situations). "Morbidly obese" means that your body weight is double that of it's "norm" on medical/insurance charts.
- Unless there is a "bona fide occupational qualification" which requires that a woman not be fat, body size cannot be used as a criterion for employment.
- Can use same tactics in court case as are used in sex discrimination cases -- collect data, show that percentage of fat people hired is lower than the percentage of fat people in the general population. This shifts the burden of proof to the employer.  
  
In municipal employment -- the city does not have the same rights as an individual -- far higher obligation than a private corporation.
- Height & weight questions are illegal for teachers -- must gather evidence. In some cases physical appearance and fitness are the first criteria on the interview form.  
  
As far as teachers' pensions, the employer must find an insurance/pension plan that does not discriminate.
- Companies will often say that they cannot get the necessary insurance for fat employees, and that is why they will not hire fat people who weigh over the "insurance tables". What they do is to divide the total weight of the employees and divide by the number of employees --- employment criteria should be based on genuine medical consideration.
- Statistics are needed in organizations such as that fat people are absent less etc. These contradict existing myths about fat people's "poor" working habits.
- Several states (Michigan and Ohio were cited) had state laws which say that it is illegal to discriminate against fat people. In Connecticut, height/weight requirements are now considered to be sex discrimination. In New York it is illegal to discriminate against someone because of how they look.

Goals and Priorities for the Fat Liberation Movement

Notes from the meeting of the Feminists Fat Activists Working Meeting.

The final meeting at the First Feminist Fat Activists Working Meeting was to discuss goals and priorities for our movement as a whole. Recognizing the diversity in politics and lifestyles present, and the resulting diversity in goals, we decided to brainstorm all of our ideas of what Fat Liberation might do. The following list is that brainstorming session -- it includes some ideas that are being carried out (such as a network newsletter and T-shirts) and others which are clearly fantasies. Ideas below are listed in the order in which they were presented.

- Stopping dieting for everyone.
- End fat discrimination.
- Shut down medical centers that oppress fat people.
- Disseminate the correct medical information.
- Retrain doctors.
- Burn down the AYDs factories.
- Make diet pills illegal.
- Build a feminist fat culture.
- Promote and publicize a positive fat image.
- Confront the medical establishment and compulsive eating groups.
- Have all the diet articles turn into laudatory articles about being fat.
- Have a fat people's march on Washington.
- Shut down compulsive eating groups.
- Expose profiteering off our bodies.
- Prosecute the medical murderers.
- Abolish fat tracking in schools.
- Publish fat liberation works.
- Develop our own communications network.
- Outreach and education -- especially to parents of fat children.
- Create safe spaces for fat women.
- Abolish architectural and furniture barriers to fat people.
- Confront psychotherapists about their bad attitudes.
- Publish names of doctors who do bypass operations, etc. -- expose this for medical malpractice it really is.
- Boycott the diet industry.
- Defense squad against hassles (Fat Terrorist Society)
- Make "Fat Patrol" T-shirts.
- Fat sports and athletics.
- Establish a legal defense fund for fat discrimination law suits.
- Have a lobbyist in Congress.
- Start a martial arts school for fat women.
- Reach out to fat people in prisons and mental hospitals.
- 100 Fat dykes on bikes.
- March across the country.
- Expose and destroy Weight Watchers.
- Burn Jean Neiditch (head of Weight Watchers) in effigy.
- Publicize examples of strong fat women.
- Require large size blood pressure cuffs to get accurate reading.
- Develop technology for decent medical procedures -- especially surgery and ob/gyn.
- Be in marches as a fat sub-group.

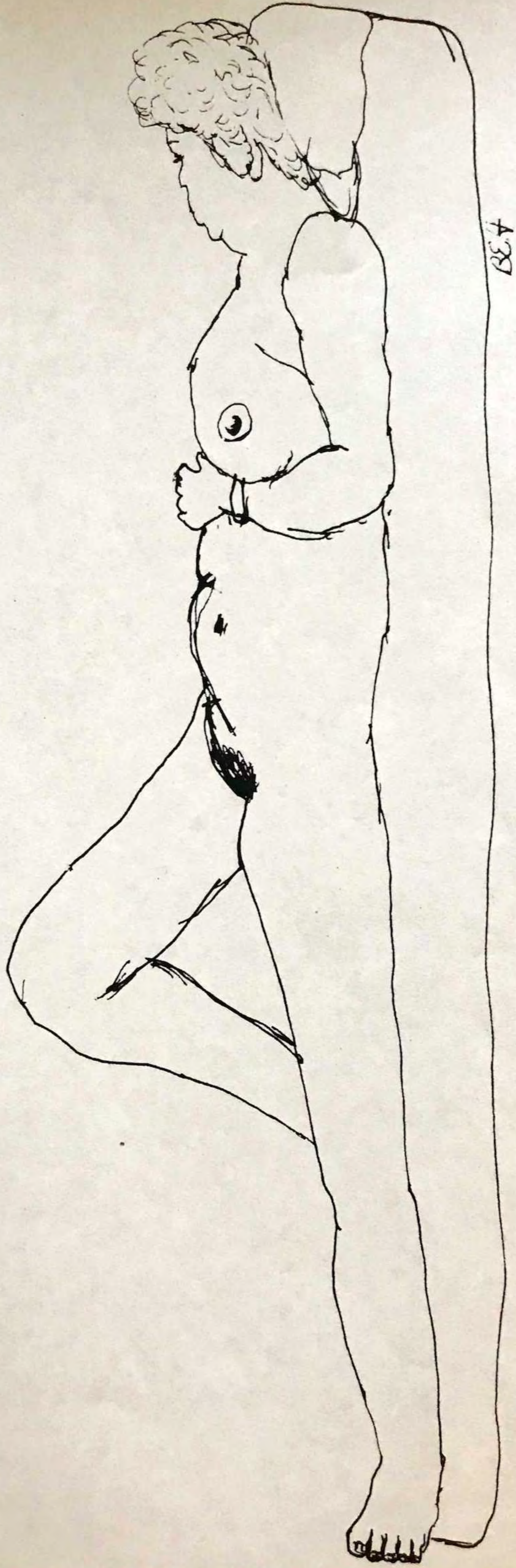
Goals and Priorities (continued)

Make clothes to fit fat women which are cheap and in many styles.  
Pay Fat Chance (fat dance & acrobatics troupe) and other fat cultural workers.  
Stop dieting in pregnancy!  
Have public demonstrations of fat people's strength and endurance.



AN EVENING OF  
FAT WOMEN'S CULTURE

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AN EVENING OF FAT WOMEN'S CULTURE

Saturday, April 20, 1980

An Evening of Fat Women's Culture was one of those rare times when we affirm ourselves, our power and our beauty as fat women. The Feminists Fat Activist Working Meeting had drawn to a close, we had eaten a lovely meal and relaxed together, and we spent the rest of the time together celebrating ourselves as proud fat women.

Participants were: (not in order of appearance)

Aldebaran and Ruth Silverman: Piano/Recorder duet

Kate Allen: Original poetry; original dance to poem by Sharon Bas Hannah  
(Sharon Bas Hannah's poem read by Beryl-Elise Hoffstein)

Karen Scott-Jones: Original poetry

Judy Freespirit: Dance and music

Judith Stein: Read original story about doing karate;  
performed karate forms (kata)

The F.A.T. Patrol: Original lyrics to favorite Broadway hits  
(Kate Allen, Marcia DuVall, Beryl-Elise Hoffstein, Elly Janesdaughter)

Elly Janesdaughter: Read original story.

Poems by Kate Allen

FAT IN A BLUE TU-TU

dance lessons.  
it was the thing  
for young girls then.  
leotards, soft slippers,  
toe shoes cotton-stuffed.  
i performed  
with the rest.  
(in a group of whirling  
glitter costumes one fat girl  
is not noticed.)

then the teacher said "duet."  
i, self-blind, trained,  
straining to move in unison  
with my partner's slender form.

one day, as we twirled  
toward each other,  
i saw how it would be:  
she, graceful, gliding toward me,  
me, fat in a blue tu-tu,  
waltzing toward her  
like a hippo bearing down  
on a reed.

i saw myself then --  
my sad body  
sagging into the years,  
and had pity on it:  
i stilled the dancer in me  
and blinded myself  
to her tears.

FAT TUB

who is it?  
it's Fat Tub.  
Fat Tub can't climb trees.  
she broke the birch branch;  
no one has found a better tree  
to swing from.

in Zorro games,  
Fat Tub looks funny  
as the lovely senorita,  
but she's the only girl a-  
round.

Fat Tub pulls  
her pants down  
on a dare.  
that's funnier  
than anything  
she's ever done!

Fat Tub doesn't care  
who makes fun  
she runs a race  
around the block  
and wins.

she can't feel  
the sticks and stones.  
see how fast  
Fat Tub can run!



On Getting Strong: Notes from a Fat Woman

July 1979

by Judith Stein

Prelude:

When I got the letter from Sharon asking me to write for the Fat Women's anthology about doing karate, I was tremendously excited. I had just that week, after a few months of study, begun to feel like my kicks had some power, like I wasn't just flapping my leg in the air. Karate has been like that for me, in the four months I've been studying: some steady progress, but then sometimes a break-through, the knowledge that I know how to do a move right, and with power and grace. Those times, those flashes of pride and strength, these days come more powerful than my old, deep-rooted shame of looking like a fool.

But now, trying to write, I am stuck, wordless. I want so much to talk about the incredible fusion in my life between the Fat Lesbian group and karate -- where these two parts of my life, together, produce an energy, centering, a power like nothing I've experienced before. The overwhelming fear of ridicule, the voices telling me I should not/can not/ought not do karate; the mental picture of myself as an uncontained/uncontainable piece of flesh whose fat jiggles when I kick and punch; these images are deeper by far than the place in me where I know my right to get strong. They are far older than my loving myself.

I think now that I've said that, I can begin.

Last fall, almost despite myself, I took a self-defense class from an area women's school. The class met for eight weeks, two hours per class, with one hour of intensive exercise/stretching, and one hour of self-defense skills. Our teacher had studied Tae Kwan Do, and she taught us out of that tradition. None of the other women in the class were fat, except for the teacher. Each and every week of that class, without fail, I would have to argue, plead, and make deals with myself to go to class. I would get to the door of the building and have to fight turning around.

I know that some of my resistance was what most women go through when we begin to learn to fight back. We are taught to be victims from our earliest childhood, and most of us are encouraged to remain physically weak. But I knew also, that for me, being fat was the biggest part of my resistance -- I have a lifetime of being told that I should be ashamed of my body, that I should not make myself conspicuous, and besides, I was too fat to be good at anything like that anyway. The teacher's tangible support, her patience, and her belief that each of us could develop these skills were major reasons why the class was a positive experience for all of us. But for me, her fatness and her skill combined, her skill as a fat woman teaching karate, meant that I could do it too, that I could get strong.

When the class ended, we talked about a second level class for the next term at the school, some months away. During that vacation, the teacher was hurt in a camping accident, and so was unable to teach. I didn't know of other women's classes, I was unwilling to study with men, and it seemed easier to let my interest slide than to keep fighting the voices inside me which said I had no business doing that anyway.

In January, 1979, the Fat Lesbian group began to meet. I had worked with several other women to organize this group as a consciousness raising/support/political action group, and from the start, the group has been a source of incredible validation for me of my life, of my struggles, of my oppression, and of my sexuality and physical beauty as a fat woman.

In March, at a rally to mark International Women's Day, some women from a women's karate class did a demonstration that was incredibly inspiring to me. Their strength, their discipline, and their obvious caring for one another were powerfully moving to me, and I took seriously the invitation for other women to join their class. I began the next week, and since that first time, I have known that learning

self defense, learning to be physically strong, and learning from the discipline of studying a martial art are central to my well-being.

In the beginning, several friends of mine began the class with me. That initial support, from women who were aware of my struggles as a fat woman to do physical exercise, was really essential. Our class is actively supportive of all the women in it: it is collectively run, and non-competitive (non-ranked.) Although only one other woman in the class is fat, and she and I haven't talked with each other about being fat women, I have found that my raising the issue of fatness and fat oppression has been consistently taken seriously, and dealt with respectfully.

One of the earliest times: we were doing warm-up exercises as a group, and a woman was instructing us on an exercise which involved a kind of stretching which I was unable to do. She instructed: "Do it this way." After the exercise, I said to her that it was important that women instructing talk about each woman doing the exercise as well as possible. She listened, apologized for defining one right way to do things which excluded me (and several other women), and since that time, women leading exercises will present them as they "should" be done, but encourage women to to the exercise to the best of our ability. For me, this means I can do the best that I am able, without feeling incapable or ashamed of not being as limber or strong as others in the class. I have found that I am getting much stronger, and am more willing to push myself to my limit instead of giving up in despair at not doing things "right".

My favorite karate story: In June, our class was invited to do a presentation at a half-way house for drug-addicted women. When the request first came up, I didn't volunteer. Later, after thinking more, I decided that I really did want to participate, for two reasons particular to me. I wanted women to see what they could do after only a few months of study (one time a week), and I wanted women to see that fat women could learn and get good at karate.

At the next class, and at our planning meeting the day of the demonstration, I brought up both of these points. The women that I spoke with were very excited that I wanted to do it, and extremely supportive. I was incredibly nervous!

We decided that the demonstration should be short and informal, and that we would present what we did in our classes so that women could see what it meant, for us, to "study karate." We began by introducing ourselves, and saying something briefly about why we studied karate, and for how long. I was toward the end of the group of us, and started by saying that I was very nervous and very excited to be there. I said that I wanted to do the demonstration because I had only studied a few months and wanted women to see what we could learn in such a short time. I also said that I really wanted to do the demonstration because I had been fat all my life and had been told in a million ways that I could never get fast or strong, and that I ought to be ashamed to try. I was learning that that wasn't true, and that fat women could learn these things.

I was so nervous that I was watching my feet but after I said that I glanced up quickly and saw a fat woman there nodding and smiling. The connections were clear to her, and real for her, and I was pleased that I'd said all that.

The actual demonstration was wonderful! I did very well-- felt strong and connected in my moves, and felt fluid and powerful throughout the whole thing. After the demonstration we shared some basic karate skills with women. They were really open to us, learned from us, and taught us plenty as well. Afterwards, I was amazed at my bravery, and energized and high for hours. The feedback I got from women in my class was very positive; it had been important for them to hear my story as much as it had been for me.

I am physically stronger now than I have ever been before. I now study with the same class twice a week. I know that studying karate will be part of my life for a long time to come. I am deeply committed to women fighting

our victimization, and I feel like I have begun to take that fight seriously for myself. Karate is a tangible way for me to clear out the self-hatred I have for my body. The support I have gotten from a few close friends who study karate, their commitment to me, as a fat woman studying karate, and their sharing of their own struggles around learning to fight back have been growing for us all.

Being able to talk with the Fat Lesbians group about being physically active has been an essential kind of support for me too. Sharing my feeling of triumph after the demonstration with other fat women, with similar issues about being physically active, physically capable, was a particular high. The space that exists in that group to talk about fears, and the constant and solid support for each other in our right to our lives, as fat women, has given me a base for karate that feels very strong.

My favorite karate fantasy: Part I. Women from the Fat Lesbian group start to study karate in my class. Karate becomes as much a part of their life as it is of mine. Every time I go to class, I see more and more fat women working out. Together, in growing numbers, we reclaim our strength. Part II. Each year there is a week-end long National Women's Karate camp. This year there were no fat women there. Next year, many fat women, from my class, and from all over the country, will be at this conference. Our grace, and our power, our size and our strength, become clear to each other. We become our own proof that women can triumph over our isolation, that we all can be strong.

THE CHEMIST -- A PARABLE

by Elly Janesdaughter

Once upon a time (in the early 1960's) there was a woman who had always wanted to be a Chemist. She got her Ph.D. in Chemistry, worked for a large industrial corporation for a few years, and then looked around and tried to decide what she was going to do with the rest of her life. She had become a Chemist to serve mankind; she didn't want to serve only a corporation.

The Chemist was very concerned about the suffering of black people. Although not black herself, she was dark-complexioned, and had rather often wished that she were blond. It must, she thought, be a thousand times worse for a black. And then she realized what she could do to help mankind. Some research had been done on bleaching skin of blacks so they could pass for white, but the results had been inconclusive. Perhaps she could develop an effective skin bleach: after all, she was a very good Chemist. With her resourcefulness and brilliant background she got a large grant from the government, set up a laboratory, and began research.

Before long, she had developed a bleaching procedure that, while tedious to apply, was extremely effective in lightening skin to the shade of most caucasians. She started speaking about it at meetings of the Chemists' Society. She published her results in their Journal. Newspapers started to report on her and her work. And many, many blacks contacted her asking if they could be treated by her new procedure.

So the Chemist set up a Clinic adjacent to her laboratory, and applied the skin-bleaching regimen to everyone who came. A patient needed three initial visits during which, after a thorough racial history, the patient soaked for several hours in a tub of chemical solution. (The chemicals, although not harmful, did sting somewhat.) After the Clinic work-up, to keep up the treatment effectiveness one had to take a half-hour bath every day in a more dilute chemical solution. And, of course, one had to return to the Clinic every month for a check-up. But if followed properly, the bleaching treatment worked. And the Chemist lined her office with countless before-and-after pictures and testimonials from grateful clients. And, of course, she made a lot of money, especially after her book, Do It Right: Be White, about the process was published.

But after a while, the Chemist began receiving a few complaints. Some people's skin was darkening up again. The Chemist was skeptical: were those people taking their chemical bath every day? They insisted that they were. The Chemist knew that her procedure was effective if followed faithfully; these people must just be slipping up without realizing it.

THE CHEMIST -- page 2

And shortly thereafter, the Chemist realized that the laudatory stories in the newspapers had stopped. Instead the papers were reporting some new phenomenon called Black Power. The Chemist was upset. People who thought black skin was beautiful? People who called her clinic a bastion of oppression? This just didn't make sense. Bleaching skin was an effective, efficient way to relieve blacks' problems. Why would anyone think otherwise?

But the Chemist did grow more concerned about the complaints of treatment ineffectiveness. Perhaps her bleaching procedure needed to be changed. She got another, larger grant from the government and renewed her research. She knew that she could develop a totally effective treatment....

Today the Chemist's Clinic is going as strong as ever. But there are still stories in the newspaper about Black Power.

Author's Note: After several attempts at writing an intellectual critique of Fat Is a Feminist Issue, I wrote this "parable" to express how I really felt about the book. The last thing I want is for this piece to be construed as racist. All references to race are to be interpreted insofar as they represent analogies to fat oppression.

THE F.A.T. PATROL'S GREATEST HITS

Debut performance at "An Evening of Fat Women's Culture"  
April 19, 1980 New Haven, Connecticut

Music: by various folks

Lyrics: by Kate Allen, Marcia DuVall, Beryl-Elise Hoffstein, Elly Janesdaughter

Tune: "There's No Business Like Show Business"  
(from Annie, Get Your Gun)

There's no womyn like fat womyn  
like no womyn I know.  
Everything about them is appealing  
Bellies, breasts and buttocks turn you on  
Where else can you get that happy feeling  
when you are squeezing that extra pound?  
There's no womyn like fat womyn  
We're big womyn and strong  
We're committed to ending that diet game,  
we're standing up proudly, we'll feel no shame.  
Don't psychologize, we'll take no more blame,  
we're moving right along,  
we're fat and we are strong!!

\*\*\*\*\*

Tune: "101 Pounds of Fun"  
(from South Pacific)

Three hundred and one pounds of fun, that's my great big honey bun  
get a load of honey bun tonight.  
Speaking of my sweetie pie, 40 inches is her thigh,  
every inch is packed with dynamite!!  
Her body's big and cuddily.  
She's so cuddily wuddily  
I love to squeeze both her knees and listen to her sigh!

\*\*\*\*\*



Tune: "Oklahoma"  
(from Oklahoma)

000---verweight is what they tell me that I shouldn't be,  
and I shouldn't eat a food that's sweet  
for they say that's what is killing me.  
000---verreating's what they say I really shouldn't do  
but I feel so well they can go to hell  
and take their diet doctors too!  
We know that we eat like they do  
all the lies that they tell are not true.  
So when we say, on your diets we won't stay,  
we're only saying -- you're doing fine, fat womyn,  
fat womyn, OK!!

\*\*\*\*\*

Tune: "I've Grown Accustomed to Your Face"  
(from My Fair Lady)

I've grown accustomed to my size  
I love my lovely, luscious thighs  
and now it's time to celebrate  
each gorgeous pound of weight;  
my stomach, my breasts, and all the rest  
I just won't diet anymore...  
'cause Diet Workshop is a bore.  
I'm going to learn to love my body just the way it's meant to be,  
I'm learning how to cherish every precious inch of me  
I've grown accustomed to my fat  
I know that's where it's at  
Accustomed to my size.

\*\*\*\*\*

Tune: "Moon River"  
(from Breakfast at Tiffany's)

Fat womyn, wider than a mile  
When I see you I smile, all day  
Whenever your damn diet ends  
I'll be round the bend  
My beautiful fat friends,  
Fat womyn, and me.

\*\*\*\*\*

Tune: "Frere Jacques"

No more diets, no more diets  
No more pills, no more pills  
No more saccahrine, no more saccahrine  
No more ills, no more ills!!

(may be sung in a round....)

THE NEW HAVEN WOMEN'S HEALTH CONFERENCE:

Reports from the Workshops

At the 1980 New Haven Women's Health Conference  
Fat Liberation activists presented three workshops  
on Fat Liberation issues, and the Sunday keynote  
panel. Workshop reports and transcripts of three  
panel presentations follow.

PANEL ON FAT WOMEN'S HEALTH ISSUES

Sunday, April 20, 1980

Participants: Diane Denne, Minneapolis, MN. (Moderator)  
Judy Freespirit, Oakland, CA.  
**Aldebaran** (Vivian Mayer), New Haven, CT.  
Marcia DuVall, Somerville, MA.  
Judith Stein, Cambridge, MA.

Format: Introduction --- Diane Denne

Welcome; note on herstory-making occasion of Fat Liberationists providing the keynote panel at a women's health conference.  
Introductions of women on the panel.  
Definitions -- Fat; Fat oppression; Fat liberation.

Discrimination Against Fat Women -- Judy Freespirit

Personal testimony about her life as a fat woman;

Political Manipulation of Fat Women Created by Anti-Fat Ideology -- Aldebaran (Vivan Mayer)

See transcription for Aldebaran's presentation.

The Diet Industry -- Marcia DuVall

See transcription for Marcia's presentation.

The Fat Liberation Movement and the Women's Health Movement --

Judith Stein

See transcription for Judith's presentation.

THE POLITICAL MANIPULATION OF FAT WOMEN

by

Aldebaran

Keynote Panel Presentation at the New Haven Women's Health Conference  
April 20, 1980  
New Haven, Connecticut

Moderator (Diane Denne): The next woman to speak is Aldebaran. She tried every diet that existed and succeeded at several of them, up to eight years ago when she stopped dieting. Her identity as a fat woman and feminist/fat liberationist came as a result of her life experiences, feminism, and doing a lot of reading in medical and nutritional journals. She has worked in fat liberation in Los Angeles and New Haven. She is also a science teacher and a graduate student in engineering.

Aldebaran:

I wish there was some way I could convey to you the amount of pain and horror that many fat women who are not politicized experience. A question that I am always wondering about and always coming to the same answer to, is why would so many women feel horrible about their weight -- and that includes women who feel they should lose five pounds as well as women who feel that they should lose 400 pounds -- why is it that there is still scarcely a murmur of discontent about how fat women are treated, about our out-front civil rights deprivation if nothing else. I mean the fact that there are actually state civil service agencies which had written into their policies, until very recently (and are now being challenged on the basis of handicapped discrimination) policies barring the employment of fat people. Not leaving it up to the individual employer's whim, actually barring them -- and I just will say that I ran into this several years ago when I was still dieting and applied for a job as a typist and was told that I was fat, and it was the company's regulations and not their own whim. And I could not challenge it. The Fair Employment Practices Commission told me that I should go on a diet, and, of course, I was -- I was in Weight Watchers at that particular time.

Anyway,, that's past history. The question is: why is it that with all this stuff going on, you hardly hear a word of protest. I think that the best way that I can answer it is that at present, these problems of fat women are not seen as political problems, but as medical problems; and as not needing a political solution but as needing

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a medical solution. Now, we hear everywhere the idea that we are sick, that we need doctors, and that that's the way to help us. We hear it from the media certainly, we hear it from you people -- by "you" I mean everyone in the culture; I don't mean to single anyone out. We hear it from family, we hear it in school, we hear it everywhere: that there is something wrong with the way we eat, and that this wrongness with the way we eat makes us physically unhealthy. And it seems to be scientific, because it is certainly uttered by the same people with the white coats who invented antibiotics, and all those wonderful scientific, medical things, and so it must be true.

Furthermore, so many cures seem to be available, ranging from the going on a low calorie diet, to going into psychotherapy to find out why we allegedly stuff ourselves so much, to getting exercise. And if those things don't work, or if we are too weak-willed to go into it, we can have our jaws wired shut and publicly show how we are imprisoning our bodies and preventing ourselves from misbehaving around food. If we don't want to have our jaws wired shut, we can have our intestines cut apart in bypass surgery, a very dangerous operation with a ten percent mortality rate. Now the latest thing is gastric stapling; we can have staples put into our stomachs so that we cannot eat food. This is being done at present at Yale New Haven Hospital [among other places]. It is considered the last hope for the morbidly obese.

Why do we put up with this? I would like to read you a statement that was given to me by a woman named Betty Shermer who is a lesbian from Los Angeles who is involved in the Fat Liberation Movement. Approximately two years before she became involved in 1973, Betty had an intestinal bypass. And she told me: "When I went in for the operation, the doctors warned me that one person out of every ten who have the bypass dies. The week that I had the operation, I heard about three people who died from it. One of them was a 13-year old girl in a city near where I lived." Now later in the same interview, she told me: "When I first asked for the operation, I was so depressed and so oppressed about my weight that I felt maybe it was best that I did die if I couldn't do something about it. I had tried every possible way to lose weight." I think that Betty's statements really are sort of the limit to which we all finally get as long as we stay in the system of believing what they tell us about us as fat women.

A more common statement is what I heard from a cousin of mine recently when I told her about what I do. She said: "Fat people don't need liberation; fat people need medical help." And the reason she said this is because she was in the middle of food binges.

I'm going to have to cut things very short, and I haven't really gotten to the body of what I wanted to say yet which is that the food binges and eating problems, nutritional problems, that many of us seem to have are almost, maybe entirely, or very largely a fabrication of the nutritional deprivation you go through trying to live on 900 calories a day. And most fat women spend their lives trying to lose weight,

contrary to stereotype. You hear over and over again -- people say "I've been on every diet possible." The fact is that the failure rate of reducing diets is 99 percent.

What it gets down to is that they tell us the reason why we are fat is that we are eating more food than slim people; and that we should be dieting, because that is the way to get less food into us; and that if we eat normally, afterwards we will be slim. This has been researched since the earliest twentieth century, and in every single study -- and there have been at least one hundred -- attempting to document excess calories in fat people, particularly in women, they find that there is no correlation between calorie intake and weight. Meaning (and this has to be heard very carefully, because this could be interpreted in many ways) they find there are fat people who eat a lot, and there are slim people who eat just as much. There are fat people who eat very little and there are slim people who eat just as little.

What actually happens is that so many of us have started off life being fat people with perfectly normal-sized appetites, and then we attempt to starve ourselves and take diet drugs and all that. And it alters our metabolism so that we end up even getting fatter on moderate calorie intakes, and every diet that we go on increases our weight successively. And I say this to echo what Judy [Freespirit, previous panelist] said: "Almost any fat woman who has lived a life of dieting is a creation in one way or another of the medical profession. That includes our size. We have gotten fatter and fatter and fatter with every diet, not because we are weak-willed, but because this is a natural metabolic response to calorie deprivation.

Secondly, regarding our health, any attempt that has ever been made to actually prove that being fat causes illness has failed in a confusion of third factors. That is, there are very fat people who are healthy, and there are moderately fat people who are devastatingly ill with the so-called "fat diseases." And what seems to be the one consistent factor that comes through in every study is that people who go on diet after diet -- which is inevitable with a 99 percent failure rate -- dieting like this, this yo-yoing, causes atherosclerosis, increases the risk of heart attacks and strokes, causes kidney disease, gallstone problems, diabetes and on and on and on. Not to mention just keeping us away from doctors because we're so ashamed we don't dare go back when we gain the weight back.

## THE DIET INDUSTRY

by

Marcia Duvall

Keynote Panel Presentation at the New Haven Women's Health Conference  
April 20, 1980                      New Haven, Connecticut

Moderator (Diane Denne): Next is Marcia Duvall who is a lesbian/feminist from Somerville who teaches math and has been fat during most of her life except for five years during which she lost 75 pounds and gained 90. She stopped dieting two years ago and has been active in the Fat Liberation movement for over a year. She is still struggling to give herself permission to eat, and wants to expose the diet industry for the brainwashing it uses on us. Believing that knowledge is power, she will speak about the extent to which the diet industry goes to try to control us.

Marcia: I've been on and off reducing diets of almost every kind for roughly 25 of my 33 years. And from my own experience and from talking with other women, fat, skinny, and in-between who have gone the same route, I have drawn two conclusions about weight-loss diets. The first one is that almost every woman is obsessed with them at some time in her life. And the second one is they don't work. No matter where you look, the statistics point toward the fact that keeping off weight is a losing battle. The most optimistic figure I found was a 94 percent failure rate over a five-year period. That means that with people who manage to lose all the weight that they want to, over a five year period they'll get back to the weight they started out as, and usually more. And this is an optimistic figure. Others say that only one person in one hundred will keep that weight off. And at what expense, both financially, and in many cases, emotionally. I'm speaking from my own experience because several years ago I lost 75 pounds and gained it all back, and more.

In our society, thin is good; fat is bad. It is also thought true that anyone with enough will power -- whatever that is -- can diet and lose weight. Therefore, for a fat person, dieting is good, not dieting is bad, out there in society.

When you limit what you put in your mouth for some ultimate goal -- thinness -- and this goal has nothing to do with how you feel about eating, and how your body feels at the present time, the deprivation, the starvation, feeds into the feeling that you are bad. What we are about here is about feeling good, about loving ourselves, and this is why we question the practice of weight-loss diets for most women.

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Now, what is this diet industry; and why should we take the time to talk about it and to examine its role in our lives and its influence on our self-image. By the diet industry, I mean the complex structure of the producers of diet foods, literature, medicine, gadgets, and all kinds of diet groups, clubs, and health professionals whose main reason for existing is to help people -- mostly women -- to lose weight.

We're here at this conference because we're committed to questioning the patriarchal health care system, and to developing our own alternatives. The women's health movement has been vocal concerning many medical issues where women have been oppressed. I would like to add to that list the urgency of examining the diet industry as a means of realizing how far the pushers of thinness-at-any-price will go. And that just as we are taking back our reproductive rights and other rights of control over our own bodies, we must take back our right to look like who we are.

For anyone who might doubt that dieting is big business, this list of the different ways that the diet industry profits from our fruitless attempt to lose weight may shed some light.

First of all, there is the diet specialist. There are doctors, among whom are pill-pushers who give the so-called rainbow pills -- this is a series of pills that you take from morning to night, all different things--what they do is make you nuts; the doctors who push speed; hormone injections; psychologists, among whom are behavior modification therapists; and fat-is-a-feminist issue compulsive eating groups. There are hypnotists; acupuncturists, who do other good things but also sometimes tell people that putting a staple in their ear can make them lose their appetite; and all of the above and others who are writing magazine articles and books.

When you go to your grocery store, or any place that sells magazines, on the cover of all those women's magazines is the latest diet blurb. Dieting will sell magazines for these people. And the sexism can be pointed out by looking at men's magazines: you see nothing about dieting. Every year there's a new fad diet book.

There's a whole range of diet surgeons, from the cosmetic surgeons who actually cut off fat and tighten skin, to those who wire mouths shut, perform the stomach stapling or intestinal by-pass operations which have a much higher risk than other operations.

There are the diet support groups: Weight Watchers, TOPS, Diet Workshop, Overeaters Anonymous. Weight Watchers alone has a \$39 million annual revenue, including all of its products and books and so forth that it sells. There are the figure salons: Gloria Stevens, Wide World, and one of those things at Gloria Stevens -- they have those jigglers -- can actually harm your kidneys.

There's the Weight Loss Clinic, the Diet-Not Clinic, weight loss resorts and summer camps. One of the newest fads is cellulite treatments. Diet medicines: Ayds, Dexatron, water pills -- sold over the counter that anyone can buy and throw their money away. There is also the function of cigarette smoking as keeping weight down. For a lot of women, the first thing they think of is that if they stop smoking cigarettes, they're



going to gain weight.

There are the gadgets -- rubber suits, belts, jigglers, and all those things that Weight Watchers sells as part of thier program, the little scales and so on. The idet food producers, which are a part of Weight Watchers. There are several brands of diet food. The sugar substitutes -- and it's been shown in studies that sugar substitutes have no effect on weight-loss diets, interestingly enough. And also that it costs ten times more to make soft drinks with sugar as with sugar substitute, and you pay the same amount for those soft drinks which are made with saccarhin or whaever, as for soft drinks made with sugar. There's Metracal and Segoo, and perhaps the most dangerous of these, liquid protein, to which upwards of 58 deaths are directly attributed.

This list just shows that, although it's proven that people do not keep off the weight they lose through dietary deprivation, the vultures are more than ready to make a buck off us. Let's stop feeding them and start feeding ourselves!

FAT LIBERATION AND THE WOMEN'S HEALTH MOVEMENT

by  
Judith Stein

Keynote Panel Presentation at the New Haven Women's Health Conference  
April 20, 1980  
New Haven, Connecticut

Moderator (Diane Denne): Next will be Judith Stein who is a lesbian/feminist who has been active in the women's health movement for the past six years. She was Co-Director of Women's Community Health Center, a feminist self-help health center in Cambridge, Massachusetts, and currently sits on their Advisory Board. She co-founded the Boston Fat Lesbian Liberation Group, a consciousness-raising and support group, and organized the Fat Dykes Group at the 1979 Michigan Women's Music Festival. She co-organized the First Feminist Fat Activists Meeting which was held during this weekend in New Haven.

Judith: I worked in the self-help movement for a long time, and during that time I learned some things about the women's health movement. Some of this also applies to women who are feminists who work in straight health-care settings, but who, in some way -- either through their individual actions or whatever -- are trying to alter the traditional health care providers. So I was glad to see the number of women who work in health care [here at the Conference].

These are some of the things that I think are characteristics of the women's health movement. One is that we have learned to take information about medicine, about health, about the facts of our bodies from women, ourselves. And we have learned to distrust the doctors, the popular media, advertising, and learned to look for the profit motive in things like birth control, cures for vaginal odor, things like that. We've learned to respect women's experiences and to validate that.

We know we're not crazy when we have menstrual cramps. And we know we're not sick because we are pregnant. And we know that menopause is a normal function of aging. These are things that we've learned as women in the women's health movement. And we've learned them by being skeptical, by questioning the doctors and the authorities about what we've been taught as women; by questioning our socialization, and most of all by listening to each other and validating our experiences. We've gone back and looked at the sources to see where medical information comes from, and what the bias might be -- where information about vaginal odor and its relation to vaginitis comes from a company that produces and sells a vaginal deodorant spray. That's not uncommon.

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That high level of skepticism about what doctors tell us about our bodies, our health, our life, is, I think, the key hallmark of the women's health movement. It's what allowed us to work actively and develop support groups for each other on certain issues where we need them, to develop low-trauma abortion techniques for early pregnancy, to learn about herbal remedies for vaginitis, herbal remedies for menstrual cramps, to learn about our menstrual cycles so that we can control if and when we get pregnant without use of artificial devices. And that's because as women in the health-care movement, we have asked questions, and we distrusted what we had learned in the past.

Now, let's look at the women's health movement in its relation to fat liberation. I want to give you just a couple of examples of where that same skepticism, that questioning, and that absolute integrity of trusting women's experiences has fallen absolutely on its face, across the board, almost without exception, in a feminist health movement that is now almost 15 years old. I think that maybe, things are beginning to change.

I am going to speak about specific situations. I am not singling these groups out as particularly bad, or the most careless, or the far end of the extreme, rude and unsupportive behavior with which Fat Liberation has been consistently met within the feminist community -- because they are not. They simply are the ones that I know about and could remember in preparing this.

Healthright is a newsletter that serves the women's health movement which is based in New York City. Fat Liberator Publications is a press which distributes material about health, written from a Fat Liberation perspective. Healthright has lost manuscripts from Fat Liberator numerous times. After they lost it the first time, they requested it a second time, and then lost it again. There is a certain amount of carelessness that those of us in the women's health movement have experienced from state bureaucracies which we know is deliberate. I have serious questions about a certain level of carelessness that causes manuscripts dealing with fat liberation to be ignored, lost, disappeared or dealt with in absolute disbelief.

I have one other story about feminists in the health-care movement. A group of women I know were staying in a house in Washington D.C. last fall, during the National Gay and Lesbian March on Washington. That evening before the March there was a big discussion -- there were a lot of women staying at this house. The discussion began because a number of these women were fat women and fat liberationists who had met each other at the Fat Liberation meetings at the Michigan Womyn's Music Festival, and were having a sort of reunion. So naturally enough, the conversation turned to issues around fat, fat politics, and in an audience of feminists, among a group of feminists there for a political event, there was a discussion about fat oppression, and fat liberation.

Women went to bed, got up the next morning, and went to the march. Later they heard about a conversation. And the particular thing about this conversation was that is involved, among others, a Physician's Assistant who carried great credibility because she is a feminist and a health care provider. And this woman's comment was: "Perhaps we should lay the oppression on thick on fat women. Maybe we really need to oppress them, because then it will get so bad, they'll lose weight." I ask you to play this same remark in your mind, with a group of men talking about increasing their sexism in an attempt to subdue feminist activity.

I don't think this was an atypical attitude. There has been, from the women's health movement, and the individuals in it, from women's health centers and from feminist health providers, an absolute unwillingness to question the medical information about fat. Even feminists and political women who know that is it not cool to talk about fat being ugly, will still at their bottom line insist that it's not healthy -- and give examples of fat women they know who have health problems.

But that's a lie! It's the same lie that we were taught about birth control, about menstruation, about sexuality, about pregnancy, about vaginitis. It is lies from the same source, from the same people, for the same motives -- profit from and control over our lives.

So what do I want from the women's health movement? What do we want as a Fat Liberation Movement? What should all of you want for all of us, as women trying to control our own lives?

It's really very simple. What I want from women in the women's health movement, from women as health-care consumers, from women who are health providers, is to apply the same skepticism that we have learned to apply to what we have been taught about our lives as women in all these other areas, to apply that same skepticism to what we learn about nutrition, to what we learn about fat, to what we learn about the connection between eating and weight, which has got to be one of the grossest and most widely believed lies that's controlling our lives.

If we were to begin to apply that same skepticism; if as a whole movement we were to begin to apply that same respect for women's experiences to what fat women say our experiences have been; if we would begin to apply that same skepticism to medical texts, and read the research that has come from the Fat Liberation movement, then we could really begin to make some changes in the experience of every woman, fat or not, when she walks into a health care setting.

Concretely, what does this mean? In women's health centers, organize in-service training, education. For the New England area there are women in the Boston area who are willing to do this training for health care providers. There is a lot of literature, much of it includes factual information from documented sources, in which is contained truth about food, about fat, about diets, and about diet remedies. That's all available for the asking.

Women working in health care have to take it upon themselves to go back to their health-care setting and begin to kick ass. Because that's what it's going to take -- women who go back and say: "Just like we learned about all those other things, we learned a lot of lies about fat, about food, about weight, about diets. Those lies are oppressing women, and killing them. And we have to begin to change that."

Women who don't work in the health care field, who go to health centers, need to look around and confront the lies that come up in your individual dealings or from the things that you see on the wall, or interactions in the waiting room that are oppressive to fat women, and to all women. Fat oppression ~~is~~ is oppressive to every woman, because it keeps us in a panic about the size and shape of our bodies.

Until all of us begin to change that -- and I think the women's health movement is the absolutely logical first place to start -- because those women have a tradition and a practice of being skeptical. We have to get them to turn that around about fat, and to confront the truth -- that's something that every woman can do in health care settings.

FAT WOMEN AND BODY IMAGE, Workshop Summary by Elly Janesdaughter

Facilitators: Ruth Silverman & Elly Janesdaughter

Thirteen women attended: 6 from Fat Liberation, 3 other plump/fat women,  
4 thin women

The workshop opened with the two facilitators introducing themselves and talking briefly about their own feelings about their bodies. Then we went round the circle, each woman in turn talking generally about how she felt about her body, and why was at the workshop. The thin women tended to get off into intellectualizing about fat women. The fat women were very much in touch with their own body images & feelings.

After some free discussion, Elly suggested that, as a consciousness raiser, people try to image a fat woman in their minds and complete the sentence "When I think of a fat woman, I feel \_\_\_\_\_." We went around the circle and compared responses. Overall, there was a great variety of feelings.

- Several thin women intellectualized, it was hard to pin down how they felt about fat women.
- A common theme was empathy with the fat woman, feeling her pain and hurt but at the same time, feeling disgust with her.

A period of free conversation followed, focused mostly on what men think about fat women. Marcia pointed out that in Europe, fat is much less disliked than here. However, because of sexism, men still get to specify the range of women's weights considered desirable.

To bring the focus back to body image, we went around the circle and each woman named the part of her body she liked the most, and the part she disliked (or had disliked) the most. The results were fascinating. The liked body parts were diverse: eyes, hair, hands, smile, breasts, --- although muscular strength was mentioned frequently by both thin and fat women. But on the most disliked body parts there was great consensus: stomach and thighs. We wondered by this was so. Is it because the media focus on fat stomachs in particular as unattractive? Is it because the media give women mostly negative images about our bodies, so it's up to us as individuals to pick out the body parts we like? Kelly suggested that fat women are hated because we look pregnant. A plump woman noted that no one state that she liked her vagina; also that we do tend to think of our bodies as parts. Do men think of their bodies as "penis" and the "rest of it"?

A short period of free discussion ended the workshop. Everyone seemed in good spirits. I think the workshop did help raise some consciousness among some of the women present who weren't in Fat Liberation.

ANOREXIA and COMPULSIVE EATING: Workshop Summary by Aldebaran

Faciliators: Aldebaran and Prudy Smith

Approximately fifteen women attended this workshop. About one third were from the fat women's meeting. Of those remaining, slightly less than a third identified themselves as "anorexic," and more than a third as "compulsive eaters" and "fat." It is interesting to note -- because very typical of such workshops -- that none of the women who called themselves fat and attended that workshop (outside of our own group) were of a size large enough to have to buy their clothes in special stores.

The workshop was organized in three sections. In the first section. women wrote down descriptions of their own eating behavior that they felt was "compulsive" or "anorexic," on unsigned pieces of paper. The papers were exchanged by drawing them out of a box, and women read to the group that statements, anonymously. I do not recall the details, but the behaviors ranged from behaviors that made women feel bad about themselves to behaviors that interfered with the business of living. The purpose of this activity was to show the fallacy of psychiatric labels, since the behaviors described actually covered a very wide range. Concluding this section, women went around the circle free-associating with "a woman who stuffs herself with food is....." and "a woman who eats hardly anything is ...." I noted that the associations with food stuffing were all negative; the associations with anorexia were mixed negative and positive, with negative (and rather diagnostic) comments (i.e. "manipulative") coming only from the women who actually defined themselves as "anorexic." My suspicion is that these words are not so much natural feelings as diagnoses they have learned through their therapy.

In the next section of the workshop, I described my experiences, behaviors and feelings as a "compulsive eater" and as an "anorexic," and Prudy talked about her feelings, self-examination, family relations, etc. as an "anorexic." (I'm not sure that "anorexic" belongs in quote marks -- it means "not having an appetite to eat," which is somewhat true, but let's leave the labels in question.) The women present showed evidence of strong identification here -- heads nodding etc.

Finally, we had a more open discussion of appetite, eating behavior, sexism etc. There was a general agreement that "anorexia" and "compulsive eating" are related through anti-fat, anti-female social values. Prudy characterized young women who became anorexic as wanting to please, passive, uncomfortable with peers and preferring unequal relationships with adults. Her own struggle to recover has consisted of working to get a sense of who she is. It was noted that passivity and definition-by-others are women's personality traits highly encouraged by sexist values. I shared research information about the development of "compulsive" eating patterns in laboratory animals subjected to food-related stresses similar to those experienced by women who see themselves as "too fat," and shared information about how I had stopped bingeing on food by ceasing to regard

myself as "too fat" and ceasing to diet. It was also emphasized that these are political actions and are extremely difficult to accomplish without the support of a group that identifies fat women's problems as primarily political.

Another typical occurrence in this workshop: one woman, somewhat fleshier than a model but dressed like one, defined herself as "fat" and a "compulsive eater," had a lot of difficulty hearing that fat people don't necessarily eat more than slim people. She appeared unconvinced by reference to studies and an offer to show her specific references. She left without speaking to anyone as soon as the workshop was over. I think she is a fat woman who desperately wanted to hear that she has a disease, so that she might hope to be cured.

In general, this workshop felt very good, one of the best that I have done on this subject. Although Prudy's orientation is very different from mine, I found her pleasant and supportive to work with and think that the difference provided for a more rounded atmosphere. I also very much appreciated the support of other fat-identified women in the room.



## ANOREXIA AND COMPULSIVE EATING

This report is reconstructed from notes by Elly Janesdaughter. It is meant to convey a sense of the topics discussed in the workshop; it is not a complete report of what happened.

Aldebaran talked about the fact that there are a tremendous range of eating behaviors that people call an "eating problem."

Each woman there answered the question: What are the worst eating problems you've had; the reason you called yourself \_\_\_\_\_.  
This was to understand precisely what behavior was meant by women who see themselves as having an eating problem (i.e. compulsive eater, anorexia, etc.)

Discussion of stereotypes & the emotional response they arouse -- e.g. the woman who stuffs herself with food; the woman who eats hardly anything.

Quote from Aldebaran: "We have been "seized by the psychological establishment" and we have been stereotyped."

Aldebaran told her personal story of being fat, then being thin after many many years of trying to lose weight -- when she was thin, she felt vindicated about how "in control" of her life she was. For a long time Aldebaran didn't want to buy into her oppression as a fat woman. After long periods of dieting and binging, being anorexic, etc., Aldebaran stopped dieting. She found that after a time her weight stabilized. She now feels a peace & happiness about food that she never thought was possible.

Prudy told her story about being anorexic. She saw a lot of her own situation in terms of her family, and expectations on her as a woman. She referred women to a book she found very helpful: Psychosomatic Families, Salvador Minuchin et.al., Harvard University Press, 1978. Prudy said women might need to work free of their families in order to really deal with their anorexia.

Aldebaran — women are lied to, not only mystified, about our bodies. There are enormous social forces making women want to starve themselves and call it health.

The question of what we eat or don't eat is a red herring -- the main issue is fat oppression.

FAT WOMEN'S HEALTH CARE ISSUES, Report by Karen Scott-Jones

Facilitators: Karen Scott-Jones and Judith Stein

Number of participants: 6 ( including 2 facilitators)

Two general areas were covered by this workshop: suppressed medical information relating to fat, and ways for fat women to get more control over their health-care experiences and treatment. One fat woman present said she wanted the truth about the supposed connection between fatness and ill-health, and a fair part of the workshop was devoted to dispensing information (research studies, et al.) debunking this connection and pointing to a relationship between dieting and the so-called "fat diseases"; the Roseto study was cited as an example of research which **clearly** debunks the common medical cant about fat, but which is buried in medical books and inaccessible to all but those who are already aware of it. The role of stress as a cause of fat people's illnesses was discussed, in the political context of oppression as the cause of stress (fat people being an oppressed minority group which, like other oppressed groups, experiences stress as a factor of daily existence; this naturally induces stress-related diseases including high blood pressure, diabetes, heart attacks, strokes, etc. The fact that minority groups have been found to have a higher incidence of stress-related diseases also holds true for fat people, and for the same reason.)

One participant at the workshop, a health-care professional from a local women's health clinic, spurred a discussion of fat women's relationship to health care, by mentioning that the clinic she works at maintains an arbitrary 180-pound cut-off for first trimester abortions. Two women present, both fat and local residents, expressed shock and anger at this information, and the health-care worker expressed the desire for information on how she could go about helping to change this, along with changing the attitudes of her co-workers at the clinic toward fat women. A meaningful dialogue ensued largely between the health-care worker and the workshop's other co-facilitator, about the process of re-educating feminist health centers and workers about realities vs. fiction around fat and fat women's health care needs.

It was my impression that this workshop was received with a great deal of interest and that the information shared was received with appreciation by those women present who hadn't heard it before. One of the women present gave me her name and address afterwards, asking that I contact her about organizing fat liberation outreach to local fat women, something she wants to get involved in!

FAT WOMEN'S HEALTH CARE ISSUES, Report by Beryl-Elise Hoffstein  
Workshop Report

This report is based on the copious and diligent notes taken by Beryl Hoffstein.

What women came here for:

- wants to know about lack of correlation between dieting and obesity mentioned in the keynote panel. Tired of being told that what she feels is due to her weight.
- Wants to discuss ways we are abused by the health care system & what to do about it.
- Wants to discuss strategies for health care workers dealing with fat.
- What to do about bad health care?
- Myths & truths about health problems & fat & what to trust when going to the doctor.

Presentation of Medical Information:

Hard to separate problems in health care as fat women and those because of being women -- i.e. sexism in health care system. Some clinics are good towards women, in general, but terrible for fat women.

Common medical information held by health workers and public alike:

1. Fat is disease state.
2. Being fat is caused by how we eat --- too much, wrong food, something wrong with metabolism. (VERY widely held, but never documented --- over 100 studies. Major Health, Education & Welfare Department report points to lack of correlation between fat & food, but this information is repressed. Not taught to medical people, or taught by them to public.)

Study of adolescent women. Fat women perceived selves as eating more than thin counterparts, actually ate less. Shows how deeply ingrained is idea of fat=overeater.

3. Moral character of fat people is lacking -- stupid, lazy, no backbone.

One way to deal with medical situation is to arm yourself with medical information & documentation. Bring someone with you, and talk with them before about what you want them to do there. Should be someone who knows something about Fat Liberation. (In some situations, you will have to fight to have advocate in with you.) When going in for non-fat related issues, refuse (as much as possible) to discuss weight.

Attempts to document relationship between weight and diseases-- all have failed. Fat people as a group have higher rates of heart disease, diabetes, hypertension, etc. All these diseases are stress-related (e.g. high blood pressure among Black people.) All studies have been done on either chronic dieters or people admitted to hospitals (most people already sick.)

FAT WOMEN'S HEALTH CARE ISSUES, by Beryl-Elise Hoffstein (continued)

Weight may fluctuate depending on eating over a given range. It is a myth that dieting works. Oppression based on this myth says oppression is our fault, because we could lose weight. But 99% failure rate --- and 90 out of the 99 who gain back weight will gain more than they lost.

In the initial stage of dieting, you burn off lean muscle tissues for about 2 weeks. Then, body begins to adjust to calorie deficit. The weight yoyo-ing that dieting fat people go through puts stress on body, and more and more lean body tissue (e.g. brain, heart, organs) are burned. Dieting has been shown to cause high blood pressure & other disease states in animals.

In Diet Workshop start on 2 month/700 calorie per day diet. Eventually go up to 1000 calories/day. Starvation level is considered 900 calories/day. Brain can't function well under these conditions -- therefore lazy, stupid, slow-moving stereotypes. In WeightWatchers -- success rate over 5 year period is 1% -- but the company gets a great deal of money from their brand of food, lifetime weigh-ins etc.

Why is all of this true?

Must account for profit motive in all of the health care industries -- foods, doctors, magazines, therapists, gadgets etc.

Also, every science, including obesity science, operates under a/some guiding principle(s) called a "paradigm." Everything is done to clarify the existing paradigm. In obesity science, the guiding paradigm is that fat is unhealthy, and the result of somehow eating wrongly.

Studies should have toppled this existing paradigm (no research supports it), but much research done by diet industry, who then suppress the results to maintain high profits. Sexism is also a motive-- anti-fat feelings keep women divided from each other ("How could she let herself go that way.."), keeps women spaced and weak, obsessed with food & eating behavior. Leaves very little energy to get together with other women, if we are always competing with them to lose weight. Also leaves little energy for other kinds of political work.

There are also standards of what women should look like, both male standards (sex object or obedient wife) and also standards within the Lesbian community (strong skinny Amazon still seen by some as "ideal"). These are the cultural images held up to women -- both of them are oppressive. ("Strong skinny Amazon" assumes that you can't be strong unless you're thin -- "good physical shape")

Roseto studies: Italian-American working class community studied -- most people were fat, norm was fat. Incidence of stress-related heart disease was lower than the national average for all people. When people left that community & assimilated (follow-up study to first) they began dieting or living in new hostile community, the incidence rose to national average. This information was published in well-known medical journals and then ignored/suppressed.

What are fat women's real health problems?

Hard to answer because few studies separate dieters and non-dieters. Often the subjects for studies are fat patients, control population is thin nurses. Probably won't get a true answer from medical sources.

Problems in treatment:

- often refused emergency surgery, or must sign a release waiver if fat. told of problems with anesthesia, more bleeders, that fat takes longer to heal.
- Often told to lose 50 pounds before surgery, so surgery takes place right after putting body under enormous stress/
- One local women's health clinic has cut off for out-patient abortions at 180 pounds. Doctors maintain that they can't feel uterus and it is difficult to tell if in the first trimester. (This is an arbitrary and bogus reason, although not uncommon. Practitioners must be retrained (both skills and attitude) to learn how to feel for uterus in fat women.)

How do you know what is your right body size?

- A lot it has to do with racial and hereditary factors.
- Also, many women will never be at what their correct body weight could have been due to chronic dieting and changed metabolisms.
- Need to learn to trust ourselves about eating (example given by one woman of weight within 20 pound range for 10 years with very different eating styles during that time -- from health foods diet to junk foods diet)
- Relax, figure out what you like to eat & why. Susie Orbach's premise that if you relax & feel good about yourself, you will lose weight, is just not true.
- In order to really figure out own appetite & size, need support from others because rest of culture is fighting against relaxation around food.
- When looking at your food patterns, must compare yourself with non-dieters who do your same type of activity.

To get good health care???

- Best strategy -- ask other fat women where they've gotten good care; take an advocate, read up on the facts, give yourself whatever emotional support and energy work you need.
- In feminist health care setting -- assume ethical accountability and confront them on anti-fat attitudes. Ask questions, make sure that the answers make sense.
- When reading research, make sure you check funding source (diet industry?)

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PRESS RELEASE

Seventeen Lesbians and womyn from Oakland, CA, Minneapolis, MN, Atlanta, GA, New York, NY, Cambridge and Somerville, MA, and the New Haven area attended the First Feminist Fat Activists Working Meeting in New Haven, CT on Saturday, April 19, 1980. We came together to support each other in our fat activist work and to make more and/or other connections with each other.

Our working meeting consisted of:

1. sharing resources available to us to use or make available to others;
2. preparing for the keynote panel we presented at the New Haven Women's Health Conference - this is the first time ever the Fat Liberation has been presented at a conference in a keynote position - it was a real FIRST!;
3. discussing how to work with feminist health activists and begin to demand that feminist health activists become aware of fat oppression within their movement;
4. Lesbians and non-Lesbians caucusing separately to discuss specified issues among and between themselves;
5. other work sessions to discuss the discrimination in employment for fat womyn, the idea that fat as a disability, and the specifics of fat oppression within the Lesbian community;
6. discussing networking - Fat Liberation movement goals and strategy plus how do we stay connected with each other.

On Sunday morning, the Fat Liberation panel at the Women's Health Conference was presented by fat Lesbians from all over the country. Diane Denne, a Lesbian separatist from the Minneapolis Fat Dykes Group introduced the panel by telling why we were doing the panel, why all womyn need to deal with fat oppression including definitions of fat and fat oppression. Judy Freespirit a fat activist in the Disability Rights Movement from Oakland, CA spoke about discrimination against fat womyn. Aldebaran (Vivian Mayer) who is a feminist fat liberationist and who began Fat Liberator Publications in New Haven, spoke about anti-fat ideology and practices with resulting stereotypes and health-nutrition problems resulting from these stereotypes. Next, Marcia Duvall, a Lesbian feminist from Somerville, MA talked about the diet industry and the nutritional manipulation of womyn through "women's magazines". Judith Stein from the Boston Lesbian Fat Liberation Front closed the panel with a presentation on the Fat Liberation Movement and the Women's Health Movement.

During the remainder of the day there were three workshops about fat womyn:

- Fat Womyn and Body Image
- Anorexia/Compulsive Eating
- Fat Womyn's Health Care Issues

The weekend ended with much sadness at leaving the support and caring that we had shared with each other and with a certainty of being another conference soon.

Fat Liberator Publications has, as of this working meeting been moved to Minneapolis. For more information about Fat Liberation and/or this working meeting, contact

FAT LIBERATOR PUBLICATIONS  
P.O. Box 7232  
Minneapolis, Minnesota 55407

From the New Haven Journal-Courier

Monday, April 21, 1980

## Fat women say answer lies in their liberation

By KATHLEEN MARY KATELLA  
Staff Reporter

Marcia Duvall has been on diets most of her life. So has Judith Stein. So has Vivian Mayer.

All three women still weigh more than 200 pounds each and expect to stay that way.

"I've drawn two conclusions about diets," said Ms. Duvall, speaking Sunday during a panel on fat women's issues, part of the Women's Health Weekend held at the YWCA. "One is that almost every woman is obsessed with them at some time in her life. The other is that they don't work."

"We've taken back our right to look like who we are," Ms. Duvall said.

The panel, and a body image workshop that came after it, provided fat women a chance to vent their anger toward doctors, the diet industry and what they call the oppression of fat women as an unacceptable minority.

Participants also took the opportunity to assert their obesity as a right rather than a problem. Their reasoning is that the medical establishment's solutions for obesity haven't helped many fat women, leaving them with the alternative of staying fat and encouraging society to accept it.

"I feel as though I am a creation of the medical establishment," said panelist Vivian Mayer, who started battling her weight problem when she was 8 years old and a doctor gave her diet pills. "It really messed up my metabolism. Now, it takes very little food to make me the way I am," she said.

According to Ms. Mayer and other liberated fat women, health care available for the obese often does more harm than good, citing surgery, diet pills, wiring the jaws shut and putting staples in the stomach. They also pointed to low-calorie diets which they said increase the risk of heart problems, strokes, kidney disfunctions and other physical disorders. Statistics show these

diets fail in the majority of cases, Ms. Mayer said, adding that even patients who do lose weight often regain it within five years.

Panelists also talked about "suppressed information" — research findings that the average fat person does not eat more than the average slim person and that chronic dieting actually tends to make some women fatter.

"The discrimination is constant," Ms. Mayer said. "I can't go to a doctor for a sprained ankle without being told I have to lose weight." Obese women, she said, also face architectural barriers, psychiatrists who tell them they're too fat because they're afraid of sex or they want to be pregnant, problems finding clothing in the right size and television commercials that stereotype fat women as sloppy.

Discrimination against fat women — which participants said is worse than discrimination against fat men — also occurs in the job market, according to the panelists. One woman cited the case of an employer trying to fill a clerical position, who told her she was just "too fat" for the job.

"In our society, thin is good and fat is bad," Ms. Duvall said. "It's not an untypical attitude," added panelist Judith Stein. "People think if they lay the oppression on thick, maybe then we'll lose weight."

One way of dealing with oppression, she said, is to be skeptical. "Women have learned to take information about health care from women themselves. That's good. We have to be skeptical, questioning, and listen to each other and validate our experiences," she said.

In the body image workshop, feminists also discussed the problems of dealing with inferiority complexes. "I have been fat all my life," said one woman. "People always said 'You have a pretty face.' I tended to look at myself from the neck up."

Another woman said fat women often get a "double message" when it comes to sexuality.