



Size-Inclusive Health Competencies for Primary Care Providers



Size-Inclusive Health and Primary Care



INTRODUCTION

Size-Inclusive Health is an evidence-based approach to health care that also addresses the impact weight stigma has on physical, mental, and social health outcomes – independent of a person’s weight status.

Size-Inclusive Health is a multidisciplinary approach that allows providers and patients to move away from weight as a measure of health and instead, focus on overall health enhancement for any size body. Primary care is “the provision of integrated, accessible health care services” that are essential to prevention, treatment, and management of many health conditions (AAFP, 2025). *The primary care medical home is where patients and primary care providers (PCP) develop trust and long-term relationships with each other as part of personalized care which is an ideal setting to adopt and use a size-inclusive approach to health.*

Size-Inclusive Health is in the family of care models that “prioritizes overall well-being and healthy behaviors without targeting body weight” (2025 AWSIM) and may also be referred to as weight-inclusive health or other terms. They share standards of care that aim to reduce structural medical weight stigma, increase access to equitable care, recognize people at all sizes experience health in different ways, and acknowledge that weight, at best, is an unreliable indicator of health in any size body (Hunger et al. 2020, AMA, 2023, AWSIM, 2025.) Size-inclusive care models differ from the traditional weight-centric models in that they do not use weight or weight change as a measure for health in any size body, they focus on health behaviors promotion without adding weight loss as an outcome, and they do not prescribe weight-loss as an intervention to achieve health or wellness for larger bodies.

INTRODUCTION CONTINUED

PCP's serve as the primary support for a patient's health care needs across the lifespan, including routine and preventative care, check-up's, coordination of care (referrals), and management of chronic conditions and other illnesses (AAFP, 2025). Size-inclusive Health is beneficial for all primary care patients, no matter a person's size, shape, weight, age, gender, gender identity, sexuality, ability, or health status. It is particularly beneficial for populations most impacted by weight stigma such as people living in larger bodies, LGBTQ+, women, adolescents, and people of color. It is also a critical approach when caring for people who are experiencing eating disorders, body image issues, weight-based trauma/abuse/bullying/harassment, body ideal pressures, weight cycling, or are engaged in body size control behaviors such extreme dieting, compulsive exercise, or weight-related medical interventions (AWSIM, 2025, Hunger 2020, MSSI, 2025, NAAFA, 2020).

Adopting a size-inclusive approach is shown to increase the likelihood of health enhancement, as well as engagement in healthcare and health behaviors (Hunger, 2020, Tylka et al., 2014).

The Size-Inclusive Primary Care Medical Competencies are for primary care providers including medical doctors, physicians assistants, and nurse practitioners and can be applied to existing primary care practice or in educational settings. The competencies are a combination of knowledge, skills, attitudes and behaviors that current or emerging primary care providers can use to build an informed, effective, ethical, and evidence-based size-inclusive approach to primary care.

CITATION

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Size-Inclusive Primary Care Medical Competencies

Size-Inclusive Competency Areas for Primary Care Providers

There are seven broad size-inclusive primary care competency areas that are then expanded to include the knowledge, skills, attitudes, and behaviors (KSAB) of each competency.

- 1 ● Identify Structural Weight Stigma & Unlearn Weight Bias
- 2 ● Identify and Address Weight Stigma
- 3 ● Address Health Concerns Independent of Weight
- 4 ● Focus On Size-Inclusive Health Enhancement and Sustainable Health Behaviors
- 5 ● Provide Informed Consent Regarding Weight Focused Interventions
- 6 ● Practice Through an Equity and Trauma Informed Lens
- 7 ● Promote a Size-Inclusive Environment

Disclaimer: The following competencies are for educational, informational, and assessment purposes for healthcare professionals to use at their discretion. It is not intended to serve as a substitute for clinical training or judgement. The content creator(s) or supporters are not liable for any risks or issues associated with using or acting upon the information. Individuals with health concerns should not disregard professional medical advice or delay seeking medical care based on these competencies which are not intended to substitute for professional medical advice, diagnosis, or treatment related to health concerns.

Competency Areas with Knowledge, Skills, Attitudes, and Behaviors (KSAB)

1. Identify Structural Weight Stigma & Unlearn Weight Bias

Size-inclusive PCP's will demonstrate awareness of the downstream impact of structural weight stigma on patient outcomes and patient engagement. They will unlearn provider weight bias by evaluating scientific evidence about weight stigma and engaging in practices that do not pathologize weight, size, or shape.

A PCP with competence in this area:

- ✓ Understands that weight stigma is a structural oppressor that influences medical education, research, policy, program development, practice, clinical recommendations, and reinforces provider weight bias.
- ✓ Acknowledges the harm that enacted medical weight stigma and weight bias has on patients of all sizes.
- ✓ Evaluates scientific evidence about impact of weight stigma and weight bias on health outcomes.
- ✓ Recognizes how weight stigma is a driver of negative health outcomes.
- ✓ Provides health care to patients without pathologizing weight nor framing body size as a problem to be solved.
- ✓ Identifies that structural weight stigma is a barrier to accessing health care for people living in larger bodies.
- ✓ Recognizes that weight itself is not a health behavior or a health outcome and can shift in any direction for many reasons.
- ✓ Identifies the current and historical harms of using BMI and weight loss as indicator of health in practice, research, and clinical interventions.



2. Identify and Address Weight Stigma

Size-inclusive PCP's will identify and address weight stigma as part of compassionate and effective size-inclusive patient care by evaluating health risks or health impact from cultural and medical weight stigma experiences, through discussions with patients about the impact weight stigma can have on health outcomes, and through awareness that diet-culture is a driver of internalized weight stigma that influences patient's decision making.

A PCP with competence in this area:

- ✓ Identifies the impact of past medical weight stigma on patient's health experience, engagement, and access to health care.
- ✓ Discusses the impact weight stigma has on a person's health outcomes with patients.
- ✓ Validates patient's lived experience of weight stigma without reinforcing weight stigmatic sources or reinforcing weight loss goals.
- ✓ Monitors and evaluates health risks related to experiences of weight stigma, such as chronic stress and allostatic load, eating disorders, weight-based bullying or harassment, and mental health.
- ✓ Recognizes and mitigates experiences of implicit and explicit weight bias when providing health care to patients.
- ✓ Understands that taking a patient's weight or calculating BMI can result in felt weight stigma even when not discussing weight or BMI.
- ✓ Identifies and discusses secondary weight stigma that a parent/caregiver may experience from a shift in a child's body size or from witnessing child experience weight stigma in any setting.
- ✓ Understands how diet-culture relies on and reinforces weight-stigma and that patients may desire weight loss as a response to diet culture pressures and beliefs about health.
- ✓ Supports patients to separate health related goals from weight-focused goals.
- ✓ Identifies how shame/guilt related to body size is result of weight stigma.

3. Address Health Concerns Independent of Weight

Size-Inclusive PCP's will address health concerns independent of weight by acknowledging that people of all sizes experience health in different ways, that a focus weight or weight loss is shown to be harmful, and provides treatment of chronic conditions without pathologizing weight or BMI.

A PCP with competence in this area:

- ✓ Practices care delivery for all bodies from a weight neutral approach, even when patients are focused on weight.
- ✓ Identifies that weight/BMI itself is not indicative of a health concern and that focusing on weight or weight loss can be harmful.
- ✓ Identifies that weight fluctuation may or may not indicate health concerns, that weight cycling is connected to negative health outcomes, and that rapid weight change in any direction may suggest need for exploration in ANY body size.
- ✓ Delivers treatment of chronic conditions and related health behaviors without focusing on weight.
- ✓ Counsels patients to manage health conditions without using a specific weight/BMI, weight range, or recommending weight changes with limited exceptions such as weight restoration.
- ✓ Discusses patient driven weight concerns without reinforcing weight stigma nor indicating weight loss or thinness as healthier.
- ✓ Identifies when shame/guilt related to body size is a result of weight stigma or diet culture and recommends size-inclusive mental health counseling to address shame/guilt.
- ✓ Conducts size-inclusive conversations about pediatric weight shifts with parents.

4. Focus On Size-Inclusive Health Enhancement and Sustainable Health Behaviors

Size-inclusive PCP's will focus on size-inclusive health enhancement and sustainable health behaviors by moving past the barriers and harms of a weight-loss focused approach and instead center patient care and practices on health and healthful behaviors that are available, sustainable, beneficial for any body size or weight.

A PCP with competence in this area:

- ✓ Guides patients to engage in health behaviors without using weight loss as positive, desired, or a secondary/"bonus" outcome.
- ✓ Lists benefits of health behaviors for maintaining health, improving quality of life or managing health concerns without reinforcing weight stigma.
- ✓ Discusses nutrition and movement as supportive health behaviors for ALL bodies without connecting it to current or future body weight, size, or shape
- ✓ Monitors the intent and impact of any patient's focus on nutrition, movement, or other health behaviors on mental and physical health.
- ✓ Recommends nourishment for wellbeing and health enhancement without prescribing dieting, restriction, or making assumptions about patients' current diet based on size.



5. Provide Informed Consent Regarding Weight Focused Interventions

Size-inclusive PCP's will provide informed consent regarding weight-focused interventions by evaluating interventions from a size-inclusive and non-weight biased perspective and by communicating risks of those interventions to patients as part of the decision-making process.

A PCP with competence in this area:

- ✓ Provides information to facilitate informed consent when a patient is engaging in any weight-loss focused interventions including by choice or when weight loss is required for access to specialty care.
- ✓ Reviews the purpose, risks, benefits, patient expectations, and evidence regarding long term health outcome and sustainability of medical weight loss interventions with patients.
- ✓ Identifies physical and mental health risks associated with body control behaviors, such as chronic dieting, food control, or chronic exercising.
- ✓ Reviews harm reduction strategies or safety plans when patients engage in intentional weight-loss interventions.
- ✓ Discusses impact weight loss focused interventions can have on a person's health over time (i.e., medically supervised diets, medication, surgeries, etc.)
- ✓ Recommends weight-neutral resources or non-weight biased supports.
- ✓ Creates realistic expectations about external referrals that are not size-inclusive.



6. Practice Through an Equity and Trauma Informed Lens

Size-inclusive PCP's will practice from a health equity and trauma informed framework by understanding the relationship of weight stigma to other structural oppressions, by recognizing the impact weight stigma or weight-based trauma has on patients' health experience and goals, and by responding to patients' health concerns through a compassionate, inclusive, and anti-oppression approach.

A PCP with competence in this area:

- ✓ Evaluates weight stigma as a social determinant of health and a barrier to sustainable health behaviors.
- ✓ Examines the relationship of weight stigma to other systems of oppression, e.g., healthism, racism, ablism, sexism, classism, etc.
- ✓ Identifies that weight stigma impacts LGBTQ+, women, Indigenous people, and people of color at higher rates.
- ✓ Analyzes how cultural body ideals likely impact patients desire to change body size.
- ✓ Understands how thin privilege and thin advantage impact care delivery.
- ✓ Describes the impact of diet-culture on patient health experience.
- ✓ Identifies marginalized patients may be trying to change their weight as a strategy to navigate systems of oppression.
- ✓ Facilitates conversations about the impact of systemic oppression on patients' weight-focused goals and behaviors.
- ✓ Lists the benefits of size-inclusive healthcare for marginalized communities.
- ✓ Identifies that weight stigma is a trauma that happens across the lifetime and patients may try to influence a body's weight, size, or shape as a strategy to avoid or mitigate traumatic experiences or responses.
- ✓ Recognizes parent and caregiver's secondary trauma response caused by witnessing a child or loved one receive weight stigmatic medical care.

7. Promote a Size-Inclusive Environment

PCP's will promote a size-inclusive environment by using appropriate size medical equipment, advocating for facilities that are accessible for any size patient, and advocating for size-inclusive care from external providers and services,

A PCP with competence in this area:

- ✓ Provides size-inclusive care to all bodies, not just larger bodies.
- ✓ Advocates for size-inclusive equipment at location of practice.
- ✓ Achieves consent to weigh before taking a weight and when necessary, explains that weighing patients may be required for monitoring trends for health reasons other than documenting BMI.
- ✓ Provides size-inclusive referrals when possible or advocates for patients to receive the size-inclusive approach with internal or external referrals.
- ✓ Recognizes patients' distrust of medical interventions due to structural weight bias in research, education, intervention development, institutional policies, etc.
- ✓ Creates a welcoming environment for patient feedback about size-inclusivity (or lack thereof) in the practice or at external referrals.



References and Supportive Resources:

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More references and supportive resources can be found at www.sizeinclusivehealth.org



For more information about the competencies and size-inclusive health, please visit:



SizeInclusiveHealth.com