

Redefining Health & Wellness

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Featured this episode: Shohreh Davoodi & Kimmie Singh

Shohreh Davoodi: You are listening to episode number 37 of the Redefining Health & Wellness podcast, and today's guest is registered dietitian, Kimmie Singh. Kimmie talked to me about her experiences as a fat dietitian of color and pointed to some areas where practitioners with privilege can do better in the Health At Every Size space. We also talked about PCOS, which Kimmie has both personal and professional experience with, and why weight loss and restrictive dieting aren't the answer to managing it. To access the show notes and a full transcript of this episode, head to shohrehdavoodi.com/37. That's shohrehdavoodi.com/37.

This episode is part of the Health and Wellness Changemakers series sponsored by Superfit Hero. The series runs from episode number 37 to episode number 48 if you want to catch them all. The goal of this series is to highlight people making waves in the health and wellness industry and taking it in a new direction. I am so grateful to be collaborating with the body-positive brand, Superfit Hero to introduce you to these changemakers.

Superfit Hero is an inclusive activewear brand with sizes that range from XS to 5XL, and their goal is to provide clothing for ultimate confidence, no matter your size or sport. All of their clothing is also ethically made in Los Angeles, California. To get 15% off your first order, you can use the special series discount code, which is CHANGEMAKER, when you check out at www.superfithero.com. And stay tuned for the Superfit Hero wellness tip of the week later in this episode.

And now, let's go chat with Kimmie Singh.

[Music plays]

Hey y'all! Welcome to the Redefining Health & Wellness podcast. I'm your host, Shohreh Davoodi. I'm a certified intuitive eating counselor and a certified personal trainer. I help people improve their relationships with exercise, food, and their bodies so they can ditch diet culture for good and do what feels right for them.

Through this podcast I want to give you the tools to redefine what health and wellness mean to you by exposing myths and misconceptions, delving into all the areas of health that often get ignored, and reminding you that

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health and wellness are not moral obligations. Are you ready? Let's fuck some shit up.

I am excited to welcome Kimmie Singh to the podcast today. Kimmie is a fat-identifying registered dietitian who specializes in management of PCOS and presents and consults on weight stigma in dietetics and healthcare. Thank you for making time to be here today, Kimmie.

Kimmie Singh: Yeah, thank you so much for having me; I'm so excited to be here.

Shohreh: Yeah, so let's first start by talking about what led you to dietetics and the Health At Every Size Movement in the first place.

Kimmie: Great question, oh my gosh. So, yeah, I originally actually finished my undergraduate degree in physics, and I was planning on pursuing a career in engineering. And after finishing my bachelor's, I started eating disorder treatment, and I was also in this place of wondering like "Okay. I have all this going on. Maybe I should reconsider some stuff." And then, so, after learning about intuitive eating and learning that there's actually this whole different way to approach food, it felt like such a good fit, and it really just felt like the way I wanted to spend the rest of my life in terms of supporting other folks in this area.

So that's sort of how I was introduced to dietetics. I know it's non-traditional in a sense that most of the people I know that practice in this way, they've been dietitians at practice in the traditional weight-normative way for so long. And then they learn about this and they're like, "oh gosh, I hate that I was doing that." So, for me, it was something I was introduced to way before I even started studying nutrition.

Shohreh: I'm hoping that we're gonna start seeing more and more of that as we're moving forward.

Kimmie: Yeah, I think that's the case. I really do. And there are so many folks who they're very early on in studying nutrition and then they learn about this. So it's really promising.

Shohreh: And before I ask this next question I just want to tell the audience that you personally identify as fat and you've given me permission to use that term

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for you as well. I always ask my guests how they would like me to refer to them, and that's a word that you've reclaimed for yourself. So in dietetics school did you have experiences with anti-fat bias, both with classmates or just in particular with the education?

Kimmie: Yeah, absolutely. So, gosh, in my first nutrition class ever, literally the first day of my first class, [laughs] the professor started the class saying he misses the days he could just call people fat and now like everybody is so politically correct and whatnot.

Shohreh: What the fuck?!

Kimmie: [Laughs] And he was not saying 'fat' in a neutral descriptor type of way. Yeah, so that was like literally my first moments of my first nutrition class. And honestly, I remember that moment so well because I felt like, "Okay, I just wanna leave. It's still early in the semester. I can probably get out of this whole program. I really can do a different thing. Like do I really wanna go through this for four years?" And I was like, "You know, I feel like there's so much good that can be done if I actually can stick with it."

And so in that moment I decided to stay, and I'm happy I did, but yeah. That beginning was really tough. So I felt like my first half of my education was really challenging for so many reasons. And I was still finding my HAES community outside of the program. And so then as I found more support and I felt like I had so many people cheering me on, I found more of my voice throughout the program. And I started speaking with some professors about it, and some students about it.

And I couldn't believe that whenever I would make a comment about it in class, so many students would come to me after the fact, or like even days later, and say, you know, "I really appreciate that you said that because I have an eating disorder history," or, "I have body image struggles." And these are students who I never would have thought because they'd never comment on it or sometimes they'd even say fat phobic stuff.

And so I feel like that experience really taught me that you just don't know who you're going to impact when you speak up. Yeah, and so then from there I worked really closely with select professors that were really supportive to try to talk about how we could make the program more

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accessible. And so now there's lectures on weight stigma that all dietetics students in that program have earlier on. And since then, the internship—the rotations part of becoming a dietitian—since then, the person who does it at that school has actually created a Health At Every Size rotation. And I'm gonna be virtually guest lecturing the semester there.

And it's really exciting. And I think it's really promising that although it was really tough at first, I felt a lot more support towards the end. And it's really helpful.

Shohreh: That's so badass that you literally were able to help essentially change the curriculum at your school, because I'm sure there are a lot of schools where there would be even more resistance to doing that. So I'm glad that you were at least part of a program where you had people that you trusted who were willing to listen to you, as they should.

Kimmie: Yeah, exactly. And I'm so thankful that I've had some professors that were really passionate about this when they learned more about it.

Shohreh: That was something too when I had Jess Campbell on the podcast because she is now going to medical school in New Zealand and we were talking about her experience as someone coming in believing in HAES, believing in intuitive eating, but going into a program that is inherently weight stigmatizing and fatphobic about kind of how she deals with it.

And she mentioned some of the same things, like having a community and really leaning into that, and also especially talking to other students because medical school is so hierarchical that she might not be able to get through to professors necessarily, but she could be able to get through to other students on her level to show them the research and help change their minds, which I think is really powerful.

Kimmie: Exactly. And honestly, in nutrition, I feel like students in this generation are just really exhausted with the idea that dietitians are supposed to tell people what to eat and what not to eat. And so I think students are really excited to learn that there's another way [laughs]. And then from there, when professors see that students are excited about it, most professors do really wanna offer services and offer support in a way that the students want it.

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Shohreh: Absolutely. Well, that's amazing.

So today we're gonna do a little bit of double duty because I definitely want to talk to you about PCOS, since that's your specialty and I feel like treating it is highly misunderstood. And I also want to talk to you about your experiences as a fat dietitian of color in a field that is severely lacking in diversity. So I think we'll start there, since we've already kind of gotten into that a little bit. And then she'll shift to PCOS a little later on.

Kimmie: Yeah. Sounds good.

Shohreh: So, what has it been like for you working in what I imagine can feel like a sea of thin and white bodies in the HAES and intuitive eating space?

Kimmie: Oh gosh [laughs], that's such a good question! Sometimes it feels like a lot of people are wearing rose-colored glasses, and they're like, "Oh, I found my people, and this community is so great and so accepting." And they don't realize that oh, actually this community can be really exclusive at times towards people with other marginalized identities outside of being fat.

And so I think that even for those that are fat, honestly, like there's so many people really uncomfortable talking about thin privilege. And so then there are some who really get it and are trying to explain, like, this is a real thing. So it just feels really confusing, because it's like, in theory everybody likes this idea of all bodies having a space here and we're doing things the right way.

But then when we sort of dig a bit deeper and we're talking about making changes that might make people uncomfortable, that may shift power dynamics, it seems like you really just sort of start to filter out who is really willing to take that extra step.

Shohreh: Yeah, and we've definitely talked about thin privilege on the podcast before, but people come to different episodes from different places. So let's just explicitly have you say as well what thin privilege is.

Kimmie: Yes, so, gosh. The way I like to explain it is that any sort of privilege that we have in society is related to a group of people that are living at the

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margins of the society or that are facing oppression, and in a very systemic way. And so in the case of thin privilege, thin privilege occurs, as I say, because fat oppression occurs. And so the systems aren't built for fat people. So when we have the majority of seats that are only for smaller bodies, when we have legal discrimination against people of size for employment, when people face healthcare discrimination on a daily basis because doctors aren't trained in their anti-fat bias. Those are examples of oppression.

And so thin privilege doesn't mean that you don't experience body shame, or body dissatisfaction, or even just poor body image as a whole, it just means that your body is navigating this world differently because society sees your body as more of the default.

Shohreh:

Yes, and so important to mention that. And I'll also link to Lindley Ashline's Instagram in the show notes for this because she's been doing a really great series on thin privilege. She just had one, maybe it was yesterday, where she was talking about how thin privilege is having access to specialty equipment. So things like hiking pants, or skiing shoes, or sports bras, or whatever – all these different things that if you are in a fat body, that you may not be able to access it, which is going to keep you from even being able to participate in certain activities.

And it's just stuff like that, that if you have thin privilege, which a lot of people do, you don't think about it and that is a privilege in itself that you don't have to think about the fact that things are made for you in this world, and they're not made for other people.

Kimmie:

Exactly. And even when we're discussing specialty equipment, even specialty medical equipment. So the place, like the way people get mammograms, it's not necessarily inclusive. Other types of medical equipment, it's literally designed and tested on people, usually on men, but also on people that are in smaller bodies. So there's literally people avoiding healthcare because they're being forced to have really painful experiences. And this is a literal example – just two weeks ago I went to the dentist, and the dentist wanted to check my blood pressure because lidocaine raises your blood pressure.

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And so the dentist didn't have a large enough cuff. So, like literally they kept trying to check my blood pressure. It was way too small, like my hand was going a little blue and –

Shohreh: Oh my gosh!

Kimmmie: – at last they were like, “This reading is really high, and it’s most likely higher since it’s not even the right size. So I want you to go to the doctor and get a note.” So me and my partner took off time work to go to the dentist so he could bring me home after. And I had to just get sent home. And so I go to the doctor yesterday. The doctor is like, “What are you talking about? Your blood pressure is fine, and the cuff was too small.” And so like my blood pressure is okay, and it was all because she didn’t have the right cuff. And so not only did she not have the right cuff, there is no apology around that. It was more of, “It says it’s high here, and it’s probably actually higher.”

Shohreh: Oh my gosh. And you think about like, this for you is absolutely, this is a frustration, it’s an inconvenience, it can ruin your day or your week. And then, of course, when you extrapolate this out, it can expand to be so much worse. Like I was thinking about the example that medical students only practice on thin cadavers, for example, for surgery and things like that. And so we have a giant class of doctors out in the world who haven’t done surgery on fat bodies and don’t know how to do it. Don’t necessarily have the right tools. And then that blame gets put on fat people instead of on the medical establishment for not being inclusive, which is ridiculous!

Kimmmie: Exactly. And yeah, it’s so unfortunate. Yeah, it makes me really upset, and it’s also very much a part of my day-to-day. And I think that another part of privilege as a whole is, you know, being able to have the conversation and then go on about your day-to-day without having to internalize it. But for me, the stress of going into an appointment and not knowing, are they going to make comments about my body? Are they going to not give me this procedure because of my body? Like there’s just a lot more to it.

Shohreh: Yeah, there absolutely is.

Kimmmie: Yeah.

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Shohreh: For those who do have thin privilege, and other privileges as well, are there things that you've seen that they could be doing better to make sure that there is room for voices of marginalized individuals in HAES?

Kimmie: Yes, oh my gosh. So first, I would recommend pausing this podcast and going to my Instagram page—the handle is @bodypositive_dietitian—and if you look at my stories, I created a series on thin privilege. And people responded with specific experiences of oppression or bullying and just sort of, it's something that I've had so many people message me and say, "I cannot believe how much this opened my eyes. I didn't realize all of this was going on." And I think that alone might be helpful just to help you acknowledge that okay, this privilege is really there.

And so aside from that, I would definitely recommend sitting with the discomfort of, if you're feeling defensive or if you're feeling like, "Oh, are you saying that thin people don't have it hard? or "Are you making these assumptions about what it's like to be thin?" Yeah, that's really different from being systemically oppressed.

So I'd recommend just generally learning a bit more about social justice and how its privilege occurs and so many other facets. And so this is just about being thin. And I think in the HAES space thin privilege is far more accepted to talk about than white privilege.

Shohreh: Yes.

Kimmie: [Laughs] Yeah, like I said, so if you're feeling like you wanna learn more about what you can do here, I definitely recommend just sitting with that and trying to gain information. And then also trying to take steps to give more opportunities to people of size, specifically if you're being asked to speak about weight stigma and you don't experience weight stigma because you're thin, it might be great to respond and say, "I'm happy to try and help you, but first let me try to connect you with someone who actually experiences this."

It might be really difficult because you might want that recognition, and you might actually be quite an expert compared to a lot of other folks in this field. But that being said, we're not going to give people with

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marginalized bodies more power or a better place in society by giving these opportunities to people that are thin.

Shohreh: Yes, absolutely. And this reminds me of someone whose name I won't mention here, but for instance, I asked somebody to come on the podcast as part of a series and they are a thin, white woman. And she responded and she said, "Hey, I would love to. However, I need your assurance that this series is going to be diverse, that it's going to feature a lot of people of color and a lot of fat individuals. Because if it's not, I don't want to participate. And also, I would be happy to send you other individuals who you can reach out to instead of me." Like that's the kind of allyship that we need to be seeing.

Kimmie: Exactly! Exactly! And I think it's really getting in the game with us. Like it's not just cheering on fat people from the sidelines. It's actually getting muddy and really doing the work.

Shohreh: Yes, and another thing too that I think is so important that Your Fat Friend talks about a lot, and I'll link to her account as well in the show notes, is if you're going to be an ally, you have to do that even when people aren't watching you, right? So if you're around strangers who are bashing fat people, then you need to be the one to step in in that scenario, as a thin person with privilege.

Kimmie: Exactly. And the discomfort of speaking up against that is so, so, so far less than the discomfort of being the target of it.

Shohreh: Yes, exactly. Another thing I'll ask too is if you've seen any particular practices that you would say are stigmatizing coming from practitioners who are more privileged, but that they maybe tend to be more defensive of those without realizing the harm they may be causing? So this could be in things like marketing or just how they're practicing.

Kimmie: Oh gosh, yes. So, as a whole I would say...and this is something where I get a lot of clients that seek me for consulting who say, "You know, I'm really worried that people that are in larger bodies aren't going to trust me because I haven't experienced it. I'm scared that they won't see me as the expert. I'm scared that we're not going to be able to form a stable relationship." And my response is always the same. I see so many people

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in larger bodies, and their issues have not been with all thin providers. Their issues have been with thin providers who are not able to name that they don't know.

And so the big issue, I think, that comes in is when our ego tells us that we need to be the expert in the room. And in reality, if it's not your lived experience, there's no way you can be the expert and that's okay. And I think just being able to sit with someone and not try to fix it or not try to smile it away, but to really be able to be serious and say, "I'm sorry this is happening, and I'm seeing you, and it's real."

I think that's really powerful. Just like as dietitians and healthcare providers, there's always such a push to try to fix or find a solution, when in reality there's not necessarily a quick fix for any of this stuff.

Shohreh: Yeah, and sometimes just being willing to say, "That fucking sucks, and I'm sorry that's happening to you and I'm holding space for you," can be enough.

Kimmie: Exactly, exactly. The other thing that comes to mind is something my friend and I were recently talking about in how you can be kind and still be a racist. You can be kind and still be fatphobic. You can be kind and still be all the things [laughter].

Shohreh: Ooh! That is the truth!

Kimmie: Yeah and so just a reminder that no matter how nice and friendly we are, or how much our intentions might be in the good place, that's not really indicative of how much harm we may unintentionally be causing. And so I always recommend that people either get supervision or consulting from folks with a variety of marginalized identities. And also not to hesitate to reach out to people that you know might make you a bit uncomfortable because you know they'll be so direct.

Shohreh: Yeah, that's so true. Sometimes you just need that direct statement at you about what you're doing wrong, even though it's hard to hear.

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- Kimmie:** Yeah exactly. And I know for me, those direct statements have been just like the most rewarding things anyone could have given me in terms of how it's sort of led to my own growth.
- Shohreh:** I think too there's this misconception in social justice that like once you've declared yourself for social justice, like, you're not gonna fuck it up [laughter], and you're not gonna make mistakes. And it's like, you totally are and you're gonna do it a lot and you're gonna cause harm. And the question is, how are you gonna react to it when you do?
- Kimmie:** Exactly! Yeah, like I know I probably still cause harm in so many ways, and I'm still evolving in so many ways. And I would be like joking myself and also joking this whole, like so many communities, if I really said that because I've done this work, that I have it all together in that way.
- Shohreh:** Yeah, because nobody does. I mean, that's the thing is there's so much pressure, I think, to be perfect in this, and that is impossible. And perfection itself is a form of white supremacy, which is something I've talked about on the podcast before.
- Kimmie:** Exactly, yeah, so it's really recreating that same stuff that we're fighting so hard against.
- Shohreh:** There was this post I saw recently by Monique Melton, and I will link to it and link to her account, where the caption was, "Diet culture is anti-blackness. So center the voices of black women in the anti-diet culture movement." And that was something that I looked at, and it kind of took my breath away because it's so true, but it's so overlooked in the anti-diet and HAES space as well.
- Kimmie:** Yes, absolutely. And this is so timely for me, honestly, because I recently saw a presentation at a workshop. It's a WIND workshop—Weight Inclusive Nutrition Dietetics—and Veronica Garnett gave a killer presentation. I think it was on like HAES and cultural competency. I forgot the title. But she really went in on white supremacy, [laughs] and oh my gosh. It put into words so much that I have been feeling and so much of like, "Why can't I bring this anti-diet message to my community?" There's something that feels like it's very much created in the mirror of white women.

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And so Veronica described it as, and I think she also quoted Monique when she was describing it, the pressures to sort of change your body to be thin and the pressure that we feel from diet culture is really pressure to conform. And it's the pressure to conform that's put on us by white supremacy as a whole. And so for people of color, there is this pressure to be thin, but it's also like, our whole identity, our whole existence, like we have this pressure to conform in so many different ways. So it sits with us differently than it does for a white woman who doesn't feel this pressure in so many other ways, if that makes sense?

Shohreh: Mmhmm. Yeah, it does.

Kimmie: And so, I don't know, like for me it just feels very timely. And I know it can be something where if someone is not sort of accustomed to examining their privilege, looking at their white privilege can be really difficult. But I think that there's so much to it. I just highly recommend exploring that, because as a person of color, like I said, it puts so much into words that I've been feeling for so long.

Shohreh: And a great place to start that exploration if you're new to it, besides Monique's account, which is wonderful, is the book, *Fearing the Black Body*, by Sabrina Strings, which I will link to and have definitely linked to with other episodes as well. Because it's just a really great place to start if this is a new idea to you, and you aren't quite able to make that mental leap between diet culture and white supremacy. And I think that's a leap that especially if you're white, you need to be making.

Kimmie: Yes, and I also recommend reading the book, *White Fragility*, I think it's a game changer.

Shohreh: Yes.

Kimmie: It's written by someone that's white, and yeah, I highly recommend it.

Shohreh: *White Fragility* is one of my favorites. I think that's a great one too, so I'll also link to that one.

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Welcome to our Superfit Hero Wellness Tip of the Week featuring trainers and coaches from Superfit Hero's Body Positive Fitness Finder. Let's listen to what wisdom is being shared with us today.

Abbey Griffith:

What's up everybody? My name is Abbey Griffith, and I am the owner and founder of Georgia's first full-service, body-positive gym called Clarity Fitness in downtown Decatur, Georgia, right next to Atlanta. And I am so excited to be talking to you today about a fitness life hack that really, really changed my life.

With my history with fitness being super diet industry, super nasty focused [laughs], I went through a long learning curve of figuring out how to make it fun and how to focus on what health is really there to do. Which is make you feel good, build community, have some fun, move in a way that works for you, and ultimately feel better from the inside out.

That tip all comes back to not 'should-ing' yourself, which is my favorite way to put it. 'Should-ing' yourself is getting down on yourself about all of the rules and all of the 'should's' and 'shouldn'ts.' I should work out for X amount of time, I should be burning this many calories, I should be able to move like her. All of that is toxic, and ultimately isn't helping you.

So get back into your body. Get back into what feels good, what you enjoy and let that be what sets the tone for you and your fitness.

Shohreh:

I hope you enjoyed this week's wellness tip. You can find out more information about the dozens of amazing trainers and coaches included in Superfit Hero's Body Positive Fitness Finder at www.superfithero.com. And don't forget to use the series code CHANGEMAKER for 15% off your first purchase. And now, let's get back to the show.

All right, so let's switch gears a bit to talk about PCOS. And while PCOS affects a lot of people, there will probably be listeners who haven't heard of it or just don't know much about it. So maybe we can start with the PCOS primer about what it is?

Kimmie:

[Laughs] Yes, oh my gosh. So, PCOS stands for polycystic ovary syndrome. PCOS is a hormonal disorder. Yeah, it's something that is sort of like defined by what symptoms you're having or what experiences you're

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having. So it's diagnosed by having at least two out of the three following experiences: One is irregular periods, the other one is high androgen levels, which can be seen as high testosterone. So that would be manifested through extra facial hair, maybe thinning hair on the top of the head. And then the last symptom is polycystic ovaries. So it's these small cysts on the ovaries that are around the eggs. That being said, if you keep that in consideration, you don't even literally need the cysts on your ovaries to have this diagnosis [laughs], which I know can be really confusing.

Shohreh: Well, and I feel like a lot of people...this diagnosis gets missed. They have symptoms and things going on for years, and years, and years, before they finally find a doctor who even mentions that this exists.

Kimmie: Exactly, yes. And a really big issue is that a lot of doctors think it only affects fertility. They don't necessarily recognize how it affects so many other parts of existence, even related to hunger and fullness and intuitive eating, and related to changes in body size and weight changes, mood. Gosh, the list really goes on.

So, I get really worked up about it. I don't know if I mentioned it already, but I do have PCOS, and when I was diagnosed, I was 19 and I was pretty much told, "Oh, I think you have this thing called PCOS, you might have trouble getting pregnant one day." And then my doctor almost left the room, and I was like "Wait, can I get more information?"

Shohreh: Oh my gosh.

Kimmie: And she was like, "Oh okay, yeah sure. I'll have the nurse give you a pamphlet." [laughter]

Shohreh: Oh no!

Kimmie: I don't remember, well actually no, now that I'm talking about, the nurse *did* give me a pamphlet, but it was all about fertility. And so I was like, "What do I even do with this? I'm not trying to have kids right now." [laughter]

Shohreh: Right, you were like, "Wait, this is not helping!"

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Kimmmie: Yes! And this was like in, oh gosh, what was it, like 2010 or something? So I feel like the internet was obviously there, but Google was less helpful. But I went home and I Googled it, and it was just, there were a bunch of symptoms that I was not experiencing. So I was like, “Yeah, I don’t really know if this woman even knows what she’s talking about.” And I just kind of pushed it off.

And then a couple years later I was having a lot of the sudden weight gain, a lot of other hormonal changes, and I went back to that same doctor and she literally was yelling and told me to get bariatric surgery.

Shohreh: Oh my god.

Kimmmie: Yeah, and I honestly was not given much more information from her except for “You have PCOS, you need to have a super low-calorie diet” And yeah, it was not helpful. So, fast forward to like a few years later, I started being mentored by Julie Duffy Dillon, who I’m sure many people know, she knows a lot about PCOS. And she taught me a lot and I learned, oh my gosh, PCOS affects so much more.

There’s this entire existence that I was having around low energy levels and fatigue, and also carb cravings. Yeah, I thought I was the only one or I thought that I was just very low in this experience around food and also in the symptoms that I wasn’t necessarily loving. So learning more about it was really helpful for me.

Shohreh: Well, and the biggest PCOS accounts online are ones that essentially talk about managing your PCOS with weight loss and restrictive dieting, and a lot of doctors and nutritionists are spreading that message too, as you saw when you went back to your doctor. So, what does that message miss? Why is weight loss not the answer to PCOS management?

Kimmmie: Oh my gosh, so many things. So first, I mean body diversity exists, so weight loss isn’t the answer for that reason. But specifically with PCOS, I have this really big issue where, as a dietitian, I see time and time again that my PCOS clients that are coming in are really not eating enough. If you’re a dietitian in this work, you know it’s pretty common to see that. And so I feel like what I usually see for restriction, if you cut it in half, that’s what I’m seeing a lot of my PCOS clients eating.

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And they're coming in convinced that they're eating way too much, they're eating way too many carbs. And they're having really low energy throughout the day. So there's this big problem that it's causing restriction in people with PCOS, and when you're actually not getting enough carbohydrates, and your body is already struggling to do what it needs to with your carbohydrates, then you're having even lower energy levels and a worse PCOS experience overall. And you're not necessarily having the energy to do the other things like take supplements, engage in joyful movement, or even manage your stress, because you're so focused on trying to restrict.

Shohreh: And not only that, but PCOS itself actually is part of the cause of the weight gain and also makes it very difficult to lose weight anyways, doesn't it?

Kimmie: Exactly! It makes it much harder, like if you're struggling with insulin resistance. And so that's why these people that are eating such a little amount of food and they're telling their doctor, their doctor is like, "Yeah, there's no way you're eating this because you're in a larger body," or you're gaining weight, or whatever the other reason.

So, just trying to give this terrible recommendation when someone's body is feeling like it's out of control already, it just creates this, I feel like, a perfect storm. Then you add in the higher susceptibility of developing eating disorders and other mental illness with PCOS, and it makes it even worse.

Shohreh: I think I remember Lauren Newman mentioning on her episode too that weight cycling and yo-yo dieting actually makes insulin resistance worse. So it can make things worse than they already are as opposed to improving them.

Kimmie: Exactly. And then like the normal problems that you have as a result of weight cycling can also interact with the insulin resistance. So those side effects of both of those kind of amp up.

Shohreh: If weight loss is not the answer to PCOS, what are some of the ways that people can manage their PCOS without restricting their food intake into oblivion?

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- Kimmmie:** Yeah, so first, number one, is intuitive eating. Intuitive eating is possible with PCOS. I don't care what anyone else is going to tell you, it's very possible, and it's very helpful in terms of just regulating your relationship with food, and also helping with your mood and energy.
- And one thing that intuitive eating lent itself to for me was creating this really special environment where I was noticing what was going on in my body. I was noticing my symptoms. And I felt like a cool little nerdy scientist that was like, "Oh, so if I have this amount of protein, I don't have this energy dip." Or "If I combine fat, or have some milk with these cookies, I don't feel like I'm going to have a crash after."
- And so it was a way for me to sort of play around with my PCOS experience. And also not deprive myself with foods. And yeah, find a way that was supportive. And also create mental space for engaging in the other self-care behaviors that I just found crucial for PCOS management.
- Shohreh:** And I'm sure it was empowering too to feel like you had some control in this situation by getting to play the nerdy little scientist and being like, "Oh, when I do this, this happens."
- Kimmmie:** Yes, exactly and I went from this place of, "Oh my gosh, I'm gaining weight, and I need to restrict, and I need to get this PCOS under control." To this really liberating place of like, "Oh, I can really just be with my body, and that's okay. And I don't have to try to run away from it or restrict it."
- Shohreh:** And I know with friends that have PCOS, one of the things they've talked about too is almost like a grieving process of realizing, "Okay, I have this disorder, and it has changed my body. And even though I wish my body would go back to the way it was before, it may never do that." And having to grieve that and become okay with where their body is now.
- Kimmmie:** Yes, exactly. And I think that, honestly, in combination with the facial hair symptoms, or for some folks it could be acne or thinning hair, for me it pushed me to a place of body liberation and just a radical acceptance of where my body is. I would agree that it's a grieving process. And it delivered me to a place of feeling really good and okay with who I am.
- Shohreh:** I love that.

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- Kimmie:** Yeah, and so, soon after I was mentored by Julie Duffy Dillon, we co-hosted a podcast called The PCOS and Food Peace podcast. I totally recommend checking that out if you're looking for more support in this area. We interviewed a ton of great fat-positive providers and individuals who have PCOS. Yeah, it's also, honestly, it's really nice to send to loved ones with PCOS who might be wondering what the experience is like.
- Shohreh:** Ooh, that's a really good idea. Alright. Well we have come to our final question of the podcast which is, how do you define health and wellness for yourself at this moment in your life?
- Kimmie:** Oh my gosh, I feel like so much of it is really empowerment and feeling like I get to decide how I want to take each moment and not feeling like there's a sense of guilt of trying to, yeah, I don't know, just one-up myself left and right. And moreso, of like, in this moment I might not physically feel great if my PCOS is sort of giving me a bad day and that's okay.
- I think if I was hard on myself around that I would be really ableist. So feeling really empowered and not trying to be perfect or have a perfect moment. I don't know if that answers your question [laughs], but yeah.
- Shohreh:** It does. It's unique to everybody, and to me it almost sounds like you're talking about too, like presence, like being okay with where you are in the moment.
- Kimmie:** Exactly.
- Shohreh:** Wonderful. Well, thank you so much for being here Kimmie, this was an excellent conversation. How can people find you and work with you?
- Kimmie:** Yeah, so you can find me at bodypositivedietitian.com or I'm most active on Instagram @bodypositive_dietitian.
- Shohreh:** Great, I will link all of that in the show notes so that people can go find you and follow you, and I appreciate you taking the time to do this.
- Kimmie:** Yeah, no problem, thank you again for having me.
- [Music plays]
- Shohreh:** Of course.

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And that's our show for today. I appreciate you listening to and supporting the Redefining Health & Wellness podcast. If you enjoyed this episode, it would mean so much to me if you would subscribe and leave a review with your podcast provider of choice. It will really help other people who might benefit from the podcast to find it more easily.

I also love chatting with listeners, so feel free to screenshot from your podcast player, post on social media, and tag me. And if you're looking for more information on what I'm all about and how to work with me, head on over to shohrehdavoodi.com. I hope to see you for the next episode.