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Challenging standards: narratives of fat nutritionists on Instagram and their criticism of weight loss practices

Desafiando padrões: narrativas de nutricionistas gordos no Instagram e suas críticas às condutas para emagrecimento

Abstract

Introduction: Classic pro-weight-loss approaches and their amplification on digital social media have been questioned by fat activists and nutritionists who do not fit into body heteronormativity. **Objective:** To analyze the content presented by fat nutritionists with professional Instagram pages, focusing on their criticism of diets that promote weight loss. **Method:** This is a qualitative study anchored in thematic analysis methodology, conducted on the Instagram platform using public professional pages of two nutritionists who self-described as “fat nutritionists” or identified themselves as fat in their platform biography. Posts in text and video formats were analyzed from September 2021 to September 2022, with the thematic focus on “restrictive diets as a weight loss strategy.” **Results:** The nutritionists critically position themselves against the predominant focus in obesity treatment, which relies exclusively on body weight and restrictive diets. This approach has been associated with several physical and mental health issues and does not comprehensively and holistically address the complex underlying causes of obesity. **Conclusion:** By incorporating their personal narratives, patient experiences, and interactions with their audience, these professionals bring important discussions about the challenges individuals face in pursuing a healthy relationship with food and the need for kindness, welcoming, and inclusive care for fat individuals.

Keywords: Nutritionists. Social media. Obesity Management.

Resumo

Introdução: As abordagens clássicas pró-emagrecimento e sua amplificação nas redes sociais digitais têm sido questionadas por ativistas gordos e nutricionistas que não se enquadram na heteronormatividade corporal. **Objetivo:** Analisar os conteúdos apresentados por nutricionistas gordos com páginas profissionais no *Instagram*, tomando como eixo as críticas em relação às dietas que promovem o emagrecimento. **Método:** Trata-se de um estudo qualitativo ancorado na metodologia da análise temática, realizado na plataforma *Instagram* a partir de páginas profissionais públicas de duas nutricionistas que se autodescreviam como “nutricionistas gordas” ou que se

identificavam enquanto gordas na biografia da plataforma. Foram analisadas as postagens no *feed* em forma de texto e vídeo no período de setembro de 2021 a setembro de 2022, tendo como eixo temático “dietas restritivas como estratégia de emagrecimento”. **Resultados:** As nutricionistas posicionam-se criticamente sobre o enfoque predominante no tratamento da obesidade que se baseia exclusivamente no peso corporal e na adoção de dietas restritivas. Essa abordagem tem sido associada a uma série de danos à saúde física e mental e não abrange de forma ampla e holística as complexas causas subjacentes à obesidade. **Conclusão:** Ao incorporar suas narrativas pessoais, experiências com pacientes e interações com sua audiência, essas profissionais trazem debates importantes sobre os desafios enfrentados pelos indivíduos em busca de uma relação saudável com a alimentação e a necessidade de um cuidar gentil, acolhedor e inclusivo para pessoas gordas.

Palavras-chave: Nutricionistas. Mídias sociais. Manejo da Obesidade.

INTRODUCTION

The objective of this study is to analyze the content shared by fat nutritionists with professional Instagram pages, focusing on critics of restrictive diets aimed at promoting weight loss. Fat Corporealities Studies, as an epistemological field, confront the structural prejudice of obesity studies, searching new ways to understand fat bodies, emphasizing depathologization, and ensuring rights and accessibility.¹ In alignment with fat activism, the terms “fat” and related denominations value fat identities, promoting visibility and acceptance of body diversity.²

This subject is integrated into an epidemiological context that, in recent years, has placed obesity among the challenges of global public health.^{3,4} Brazil has experienced a significant increase in obesity prevalence over recent decades. Data from Vigitel 2023 indicate that excess weight in the 27 state capitals is at 24.3%, higher among women (24.8%) than men (23.8%). The prevalence of obesity among Brazilian adults increased from 11.4% in 2006 to 24.3% in 2023, reflecting changes in eating habits and lifestyle.^{5,6}

Aesthetic standards have changed throughout history, with the forms of body and meanings evolving across time and geography. Processes leading to the valorization of thinness began to take shape in the late 18th century, intensifying in the 19th century with the rise of industrial capitalism, which brought new forms of economic and social organization. This new logic of labor demanded a productive, agile, healthy, and efficient body. Within this perspective, thinness was promoted as a corporeal ideal that not only reflected health and work capacity but also aligned with values of self-control and discipline, serving as a strategy of biopower.⁷

In the 20th century, the concept of risk factors and advances in epidemiological tools from the 1970s highlighted the association between obesity and comorbidities, particularly non-communicable diseases. Consequently, fat bodies became pathologized and undesirable. This view was solidified in 1990 with the inclusion of obesity in the International Classification of Diseases (ICD), leading to various strategies to combat it.⁸

Within this context, numerous diets and food protocols, medications, laxatives, prolonged fasting, excessive physical activity, restrictive diets, among other methods, have been widely embraced by the weight-loss market and demanded by the population, often with little consideration of potential health damages.⁹⁻¹¹

Restrictive diets are categorized as a variety of protocols that quantitatively and qualitatively reduce food intake in daily routines.¹² Scrinis coined the concept of “nutritional terrorism,” criticizing the dissemination of conflicting and often alarmist information about specific foods and diets, typically aligned with industry interests.¹² This concept describes an orchestrated and coated in scientific discourse and aggressive marketing of ultra-processed food products. This rhetoric, aimed at the “health industry,” demonizes certain foods based on commercial interests. In the weight-loss niche, nutritional terrorism is a foundational element of restrictive practices, labeling certain foods as harmful and recommending their exclusion/avoidance, effectively “demonizing” specific items.¹³

Health professionals have increasingly utilized social media to promote information and services related to various bodily practices and the beauty market, emphasizing thinness and physical form.¹⁴ Instagram, as one of the primary platforms utilized by these professionals, boasts over 113.5 million Brazilian users.¹⁵ Many nutritionists use this platform to attract new clients, playing a vital role in nutritional education through informative content publications.

Although digital social networks are prominent channels for normative expressions of bodies and behaviors, they also serve as convergence points for associative movements questioning these standards.¹⁶

Social movements and activists increasingly use the internet to articulate their agendas and demands.¹⁶ Digital activism against fatphobia or “fat activism,” though originating in the U.S. feminist movement in the late 1960s, emerged in Brazil in digital form after 2010, amplifying the voices of those who have suffered violence and prejudice regarding their bodies.¹ This movement has contributed to critical discourse and encouraged health workers to adopt new approaches to care for fat individuals.^{1,17}

The importance of this topic lies in addressing the challenge of rethinking approaches adopted by health professionals and services to minimize suffering among users seeking care. Simultaneously, it raises elements to reconsider the training models for nutritionists, which remain biologically focused and oriented toward bodily normativity.¹⁸ Additionally, the role of digital platforms in sharing experiences, disseminating information, and shaping opinions is highlighted.

METHOD

This qualitative study was conducted in a digital environment using the Instagram platform. Data released in January 2023 indicate that Instagram has over 1.318 billion registered accounts worldwide, placing Brazil among the top five countries using the application.¹⁵

Instagram can simultaneously be described as an application, a social network, and a platform. As an online application, it refers to the interface between users and their interactions with smartphones; as a social network, it addresses interactions and connections between users; and as a platform, it relates to the ecosystems that govern its various functionalities.¹⁹

For analysis purposes, the study utilized feed posts in the form of videos, texts, and respective captions created by professionals who self-identified as “fat nutritionists” or explicitly referenced their fat embodiment in their bio on public professional pages.

An exploratory search was conducted from June to August 2021 to identify these nutritionists' profiles. For this purpose, the adapted “snowball” methodology was adopted, widely used in both quantitative and qualitative research for accessing hard-to-reach populations or identifying key informants. Recently, this methodology has been adapted for social networks, allowing the identification of similar profiles that share characteristics relevant to common research interests. Using a key informant, a “network community” was identified where members reciprocally followed each other, sharing experiences and interests and suggesting further contacts.²⁰

The first profile found was @nutricionistagordo by Ericka Cuzziol, a professional whose work on the platform is well-established as a fat person and nutritionist. This profile (chosen as a reference) led to the evaluation of profiles of other nutritionists she followed or who followed her, aiming to find more nutritionists with the same self-identification. In this search, four additional pages were identified, but only one met the inclusion criterion, which required explicit self-identification as a fat person in the profile bio. Although other fat nutritionists' pages were observed and debates on fat embodiment were identified during a floating reading of these pages, they were not included in the analyzed collection due to the absence of explicit self-identification.

Thus, the profiles included in the study were Ericka Cuzziol (@nutricionistagordo) and Juliana Dofini (@nutrijudofini).

To better characterize these professionals, a Google search was conducted in May 2023 to gather information about their professional trajectories from publicly available pages.

After selecting the profiles, posts from September 2021 to September 2022 were reviewed, focusing on content related to "restrictive diets." Sixteen posts addressing the study's topic were selected. The posts were downloaded using the StoryDownloader app, available on Google Play Store, and transcribed in full. Each material was evaluated by two reviewers, following the saturation criterion.²¹

The thematic analysis was chosen to operationalize data analysis, following the Braun & Clarke model,²² which allows the identification of themes in the posts that addressed the thematic of the study axes. During transcription, notes, selection, and classification of relevant content on "restrictive diets as a weight-loss strategy" were made. The most recurring subthemes identified were: "nutritional terrorism and weight loss," "restrictive diets and health impacts," and "the identity of fat individuals reduced to their diagnosis."

The data of the study sources were publicly available Instagram posts, ensuring compliance with the National Health Council and Research Ethics Resolution No. 510/2016 in Brazil. According to this resolution, research using publicly available digital social network information may be conducted under Law No. 12,527, dated November 18, 2011, without requiring review or approval by ethics committees.

RESULTS AND DISCUSSION

Ericka Cuzziol is a transgender woman. Her transition occurred during the course of this study and was shared with her followers. Today, Ericka maintains the established profile name on Instagram as "nutricionista gordo" (fat nutritionist), with the following description in her bio: "for those for whom diets do not work and health for all sizes." In September 2022, her follower count exceeded 32,000, and during the period of the study, her Instagram page had 917 posts in the form of texts, photos, and videos. The text in her bio highlights her stance on ineffective dietary protocols and the direction of her work, which goes beyond a pro-weight loss approach.

A search on Google located an interview with the nutritionist published on the website of the Brazilian Association for the Study of Obesity and Metabolic Syndrome (ABESO), in which the professional shares that her motivation to pursue a career in nutrition emerged from the painful experiences of attempting to lose weight. She expresses her desire to gain comprehensive knowledge about dietary strategies and health, hoping to find a sustainable path for weight loss. In this context, she highlights the difficulties encountered when trying to adhere to diets prescribed by professionals in the field.²³

Ericka also shared that she suffered fatphobic attacks from a professor during her undergraduate years, who stated that her excess weight was incompatible with the image of a future nutritionist. This experience had a significant impact on her trajectory and influenced her mission to combat weight-based discrimination.

The second nutritionist in the study, Juliana Dofini, specializes in eating behavior, and in her Instagram bio clearly stated that she adopts "a non-prescriptive approach." During the study period, she had 2,057 followers and 491 posts on her page. Juliana highlighted in her pillars: ethics, empathy, care, respect, and fatphobia-free care, in addition to defending nutrition without judgment and impositions. Her own corporeality is reflected in her reflections and practices and is a central theme in several of her posts.

The Nutrition Terrorism and Weight Loss

Nutritionist Juliana criticizes the practices of professionals who use the prohibition of certain foods, classified as "villains," as a method for weight loss. The posts, in the form of videos and photos, address

various topics including restrictive diets, nutritional terrorism, eating disorders, and fatphobia, aimed at educating her followers on healthy eating, respecting food culture, and the meanings of eating.

“It makes no sense – it never made sense to me – to use nutritional terrorism as a strategy for weight loss. Reducing food to nutrients and, in this way, labeling them as forbidden and allowed has never been, nor will it ever be, effective for any goal [...]” (January 11, 2022 - Juliana).

“Eating is much more than what you put on the plate. Eating is context. It has history. And your history with food began back when you were still a baby...” (October 22, 2021 - Juliana).

The narratives above primarily address criticisms of the so-called “nutritional terrorism,” which is based on the prohibition of foods considered “harmful,” “inappropriate,” or “unsuitable,” and are believed to contribute to weight gain, as well as being linked to various diseases and health conditions.¹⁷ This perspective aligns with the argument made by Scrinis,²⁴ who challenges the reductionist view of food as merely nutrients with potential functions, disregarding the broader context in which food exists.

Additionally, nutritional terrorism affects the nutritionist-patient relationship when it is permeated by normative discourse that overlooks the individual, their reality, and beliefs.²⁵ These practices are threatening for those seeking health care, as the professional presents themselves as someone who holds knowledge about the body and life of the other. The person seeking care is reduced to a passive role – a “patient,” whose voice, experiences, and knowledge are subordinated. The diet is imposed as a mandate, akin to a prescription that must be followed. In this context, communication and the welcoming approach of the professional, respecting the individual’s uniqueness, are crucial for breaking away from such approaches.²⁵

Another aspect highlighted by the professional concerns the act of eating as a social activity filled with emotional memories, carrying both positive and negative meanings for the individual. These elements transcend the nutritional and functional aspects of food, encompassing motivations tied to psychological states and emotional experiences, which are independent of physiological hunger. Therefore, food should encompass these diverse meanings and significance, considering the individual as a biological, emotional, psychological, and social being.^{11,26}

When analyzing these concepts, it becomes evident that nutritional terrorism, by excluding or undermining the value of certain foods from the cultural identity of individuals, potentially imposes a disconnection from food culture and a loss of identity for those connected to the traditions of a specific social group. Social isolation, distancing, or breaking of social bonds also contributes to a cycle of distancing from food, aiming to maintain the restriction and protocols prescribed not only by nutritionists but also by other professionals or even digital influencers.^{27,28}

In this context, it is crucial that nutritionists, during their training, should be equipped to practice based on reflections and experiences that evoke multiple perspectives on eating, food, and their cultural and symbolic concepts, valuing shared meals and their meanings.¹¹ It is important to note that nutritionists are not the only professionals who need to reconsider imposing and normalizing approaches to food, as the concept of nutritional terrorism is propagated by other health professionals, particularly through various media.^{11,17}

Restrictive Diets and Health Impacts

In the posts, both professionals analyze the scenario of restrictive diets, contrasting these practices with the attributes of a healthy diet, and also making strong criticisms about the adverse health effects on individuals who adopt such practices.

Dietary and cognitive restriction exerts a similar impact on food cravings, so it is common that during intervals of restriction, individuals experience episodes of overeating. To "regain control" over what is instinctive and natural for the body, increasingly intense calorie restrictions are necessary. This is also why restrictive diets are unsustainable (Dec 6, 2021 – Juliana).

In this post, the professional discusses how restrictive diets do not work in the long term, how they affect the body, and what the health consequences are, contributing to eating behavior disorders. The control of food intake is a complex process involving biological regulation through neuroendocrine mechanisms. However, in situations of food restriction, this automatic regulation is replaced by cognitive control, requiring that intake be monitored and adjusted according to pre-established dietary rules.¹¹ The dynamics imposed by the diet demand that the individual ignore or suppress signals of hunger and fullness, with the goal of regulating body weight, which consequently generates heightened concern and attention toward food.¹¹

By adhering to this type of diet, the individual suppresses thoughts about food, leading to constant concerns about what to eat. This behavior reduces cognitive functioning levels and increases the potential for cravings, resulting in intrusive and constant thoughts responsible for the intense desire to consume a specific food.²⁹ In attempting to exclude one or more foods, the brain interprets these thoughts as a craving, leading the individual to overeat.²⁹ These changes in eating behavior, in addition to causing various metabolic dysregulations, can lead to eating disorders such as binge eating, bulimia nervosa, anorexia nervosa, and others.^{28,30}

Another aspect to highlight, which makes the field fertile for pro-weight loss practices based on restrictive protocols, is the social standards of conformity to a particular aesthetic and beauty ideal. These standards, often replicated through digital social media, constitute a source of misinformation with strong visual appeal, reinforcing negative stereotypes based on weight, lipophobia, and fatphobia, idolizing thinness, and promoting the development of various conditions related to disordered eating.³¹

Although aesthetic pressure affects various individuals according to their age, race/skin color, and social class, there is a strong gender implication, as it is more intense for women, who seek rapid weight loss results with potential health compromises that are difficult to sustain.^{18,30} The frustration of not being able to adopt these diets generates a sense of guilt and failure, as well as mental suffering.³⁰

In this context, Ericka, on her page, shares situations experienced by people she has worked with in therapeutic journeys already undertaken in pursuit of weight loss, reaffirming her criticisms about restrictive eating not aligning with individual health, in contrast to what is widely used in weight loss programs.¹¹

The following post, entitled "Help me, but do not force me to lose weight!", presents an anonymous patient's account, who sought her consultation aiming to address the mental health impacts caused by behaviors of extreme calorie restriction in daily eating routines. In this case, the person exhibited dysfunctional eating behaviors due to the restrictions imposed on their diet.

[...] "my life turned into hell, I could only think about food, at first it was about what I could never eat again, then it became, wow, all I wanted was to be able to eat this."

[...] "the more I reduced the calories in the menu, the more it seemed like I couldn't do it, my anxiety increased, and I just thought I was a mistake, I didn't deserve to live in this world."

[...] "I only wanted to know what would be better to eat, I realized I was making the wrong choices, but the process made me think that eating right would be impossible." (Sept 22, 2021 – Ericka).

The nutritionist emphasizes that the strategy of adopting a dietary plan that imposes strict restrictions on the quantity or types of food consumed, with the goal of weight loss, not only fails to produce the desired results but can also lead to distress, both related to body weight and to the self-perception of the individuals.³² The case presented by Ericka grounds her criticisms of a professional approach that is oppressive and imposing on her patient, who expresses in their narrative a sense of guilt and significant mental suffering, already documented by other authors.^{21,32}

Another aspect discussed in the posts is the association between food restriction, rapid weight loss, and the rapid regaining of the lost weight.³² This cyclical recurrence of weight loss and gain is popularly known as the "yo-yo effect," and occurs due to an adaptive metabolic mechanism in which prolonged periods of fasting or food restriction are interpreted as a potential threat of nutritional deprivation. As a result, as a preventive measure, a portion of what has been consumed is stored as energy reserves, which can result in weight gain.^{32,33}

According to Souto and Ferro-Bucher,²⁶ a coercive approach, such as restrictive diets, does not offer significant contribution and should instead occur in a healthy and positive manner through changes in eating behavior. In this context, a responsive nutritional approach, more holistic and comprehensive, results in more effective outcomes.

The alteration of lifestyle and the adoption of healthy eating routines present challenging elements, observable in the changes in consumption patterns in the population in recent years.³⁴ Among these challenges, difficulties in access to adequate and quality food, especially fresh foods for more socially vulnerable populations, stand out.³⁵

Strategies to promote healthy, feasible, and accessible eating have been successful through food and nutrition education (FNE) in various population contexts.³⁶ FNE focuses on the representations underlying the act of eating and food, as well as the knowledge, attitudes, and values attributed to nutrition concerning health, aiming to transform eating practices.³⁷ During this process, it is crucial to seek the individual's autonomy, so that they become the protagonist in making decisions regarding their diet.³⁷

The identity of the fat person reduced to their diagnosis: "The person is not a diagnosis or the result of a treatment"

The identity conflicts of fat individuals are complex and multifaceted, accompanied by discrimination, stigma, and prejudice.³⁸ These individuals often face problems with self-esteem and body image, leading to the internalization of negative stereotypes that permeate various areas of life, associated with feelings of shame, guilt, and inadequacy.³⁹

In this regard, Ericka offers reflective statements about the approach adopted by healthcare professionals, highlighting the lack of empathy in obesity care and the reduction of an individual identity to their body or condition, and how these elements impact the care process.

In this publication, the professional presents a screenshot of a post from her page on the former Twitter, where she also created content at the time. In this post, reposted on Instagram, she challenges the idea that an individual can be labeled as "obese," instead suggesting that they should be referred to as a person diagnosed with obesity.⁴⁰ This assertion aims to establish the idea that language matters and that an individual's identity should not be reduced or defined solely by their diagnosis.⁴⁰

"You are not your diagnosis. You learn about it, you take care of it. But you are not it. The term is stigmatizing, it negates your identity. And today it needs to be explained, weight loss will not always lead to thinness. But it will always bring good results. The current concern is to maintain the results." (October 17, 2021 - Ericka).

This narrative expresses reflections and conflicts regarding the identity construction of the fat person. According to Vigarello,⁷ one possible point of discussion in the relationship between obesity and identity refers to the individual being identified through a "disregarded" body, subject to moral judgments, to which a set of disabilities is attributed.

This assigned identity not only brings social disqualification to the fat person but also impacts the perceptions and actions of healthcare professionals, leading to adjectival labels based on their health condition, thereby reinforcing stigma and prejudice in the healthcare process.⁴¹

It is important to consider that referring to an individual as "obese," "diabetic," or "hypertensive" imposes this stigmatizing gaze and may potentially reduce the person to a set of signs and symptoms, stripping them of their history and uniqueness.^{40,41} Therefore, changing these terms and language to "person with obesity," "person with diabetes" is important beyond just word replacement and should be a focal point in healthcare professionals' approaches.⁴⁰

Although de-pathologization seeks a more inclusive and less stigmatizing approach, it is important to recognize that obesity is associated with various health risks. Studies indicate that excessive adiposity in individuals with obesity has a higher probability of being diagnosed with hypertension, diabetes, or other non-communicable diseases.⁴²

Another point highlighted in these posts concerns what would be an expected outcome from the process of nutritional care focused on building healthy lifestyles. In the statements of Erika below, the theme related to the role of weight reduction in obesity treatment is addressed, confronting approaches that focus on weight loss as the central goal to be achieved.

"[...] Well, as I said, not everyone who treats obesity becomes thin. But the focus is not on maintaining good results? "As a fat person with healthy habits, you can have obesity but you are doing your part." (October 17, 2021 - Ericka).

Despite recent efforts to implement a more humanized and individualized care approach for people with obesity, prevailing protocols in weight management treatment still focus on dietary prescriptions that value the energy density of foods and food choices to be strictly followed, anchored in weight reduction, pharmaceutical administration, and surgical measures, along with a view that blames the individual for their condition.^{7,8,43-45}

Regarding her perspective on what could be considered an appropriate evolution, the professional maintains that the approach to treating obesity should be gradual.

“Look, it’s about a journey. It’s about your achievements and victories, it’s not about you being a walking disease.”(October 17, 2021 - Ericka).

Protocols based on more responsive strategies with fewer restrictions on food choices and routines have been proposed in recent years, also aligning pathways for lifestyle changes.⁴⁴ The Health at Every Size (HAES®) approach advocates for promoting health behaviors, prioritizing practices that enhance well-being, which go beyond considering body weight as the primary factor in results, and emphasizes cultivating self-liberty and quality of life, rather than focusing on a specific weight value.⁴⁴

In this context, HAES® recommends that individuals with diverse body compositions adopt self-managed care practices focused on improving overall health, mainly detaching from the concern with weight reduction. Its principles include promoting physical activity that is enjoyable and connected to the person’s life context.^{46,47}

The HAES® approach also values the adoption of flexible, individualized eating habits based on criteria such as hunger, satiety, nutritional needs, and pleasure.⁴⁶ It is in this sense that she and other similarly humanized, person-centered approaches are being discussed as potential strategies to improve the care process and increase treatment adherence among individuals under nutritional care.⁴⁸

The approach of fat nutritionists regarding eating behavior and restrictive diets represents an emerging field of study and clinical practice. This unique perspective offers a sensitive and empathetic understanding of the complexities involved in managing care across different dimensions, highlighting the importance of considering psychosocial, cultural, and emotional factors associated with food choices and access to comprehensive health care.

CONCLUSION

The debates brought by the public pages of the professionals included in this study not only echo the messages aligned with digital fat activism and the body-positive movement but also stimulate important reflections among their followers and professional colleagues. By disseminating content that challenges fatphobia and promotes body acceptance, these nutritionists are contributing to potential transformations in social perceptions of health, offering new perspectives on fat individuals and other diverse bodies.

This collective challenges the discourse of body normalization and dietary restriction, which operates along "nutritional terrorism" and reflects a hygienist view of nutrition focused on isolated nutrients organized into pre-established protocols. From the perspective of the professionals in this study, the individual is subordinated by their life context, subjected to a therapeutic itinerary that deprives the meaning of eating, food, and their symbols and notions of their significance.

A limitation to be noted in the present study is the small sample size of professionals included. The difficulty in identifying a larger number of nutritionists who self-identified as having fat corporeality is partly due to the lack of explicit self-declaration in their profiles. This finding may be associated with the stigma of ableism often directed at these professionals, which can result in discredit and fear of discrimination within the professional field.

The presence of nutritionists with personal experiences as fat individuals in their Instagram profiles represents, for some, a space of resistance for professionals who have experienced prejudice throughout their lives and professional journeys. These nutritionists, however, have taken a leading role in fostering critical reflections on perceptions of health and the therapeutic practices traditionally employed by professionals for weight loss. These professionals not only provide guidance based on scientific evidence but also establish an authentic connection with their followers, transcending stigmas and promoting acceptance of diverse bodies.

By incorporating their personal narratives, these nutritionists highlight important discussions about the challenges faced by individuals seeking a healthy relationship with food and the need for gentle and compassionate care. In this perspective, digital social networks can amplify these spaces on professional pages and health collectives, focusing on an inclusive vision of the multiplicity of bodies and ways of living, ultimately contributing to health and quality of life.

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Contributors

Santos LCS and Peixoto IA contributed to the conception, development, methodological design, data collection and processing, analysis and interpretation of results, manuscript writing, critical content review, and approval of the final version for publication. da Silva CVC contributed to the conception, development, methodological design, supervision, data collection and processing, analysis and interpretation of results, manuscript writing, critical content review, and approval of the final version for publication.

Conflict of Interest: The authors declare no conflict of interest.

Received: April 6, 2024

Accepted: August 22, 2024