

# Kendrin Sonneville, ScD, RD

## Public Health Research Dietitian



**What is your job title?**

Assistant Professor

**Where do you work (setting and/or company)?**

Department of Nutritional Sciences, University of Michigan School of Public Health

**How long have you been at this job?**

5 years

**Please describe your job (including typical role, population served and anything else you feel is important in understanding the job):**

My job involves a mix of teaching, research, and service—this is typical of faculty jobs. I teach a nutrition counseling course, which is required for students in our MPH/RD program. I also teach an elective course called Eating Disorders Treatment and Prevention that is taken by graduate students in the School of Public Health, undergraduate Public Health students, and students from departments outside of public health (e.g. Kinesiology, Pharmacy, and Social Work). My research program is focused on eating disorders prevention and weight-inclusive health promotion. The service portion of my job involves mentoring students, serving on university committees, volunteering with professional organizations, and peer reviewing.

**Does your job require any additional schooling or education?**

Holding a tenure-track faculty position generally requires a doctoral degree. I received my Doctor of Science (ScD) in Public Health Nutrition.

**What are possible places of employment for your position?**

Many people with both an RD and a doctoral degree (e.g. PhD or ScD) work at colleges/universities.

**What is your favorite thing about your job?**

Mentoring students is the part of my job I enjoy most.

**What is your least favorite thing about your job?**

Grading.

### **What is your educational background?**

- a. Michigan State University  
Bachelor of Science, Nutritional Sciences; Bachelor of Science, Dietetics
- b. Tufts University, Friedman School of Nutrition Science and Policy  
Master of Science, Human Nutrition
- c. Frances Stern Nutrition Center, Tufts New England Medical Center  
Dietetic Internship
- d. Division of Adolescent Medicine, Children's Hospital Boston  
Maternal and Child Health Bureau Leadership Education in Adolescent Health  
Nutrition Fellowship
- e. Harvard T.H. Chan School of Public Health  
Doctor of Science, Public Health Nutrition
- f. Division of Adolescent Medicine, Children's Hospital Boston  
Postdoctoral Fellowship in Obesity and Eating Disorder Epidemiology

### **What is your job/work background?**

Before going back to school for my doctorate, I worked at Boston Children's Hospital. I worked in both pediatric and adolescent primary care and worked in subspecialty programs doing eating disorder treatment and weight management.

### **Do you do any volunteer work?**

I have been involved in various leadership positions within my professional organizations (including the Academy of Eating Disorder and the Massachusetts Dietetic Association) throughout my career. Within my own community, I volunteer with the Neutral Zone, a diverse, youth-driven teen center dedicated to promoting personal growth through artistic expression, community leadership and the exchange of ideas.

### **Why/how did you decide to pursue other credentials beyond the RD?**

It was my clinical work experience that motivated me to pursue my doctoral degree and to study public health/prevention. I witnessed a great deal of suffering among the young people I was treating and their loved ones and became passionate about learning how to prevent, rather than just treat, eating disorders. I also witnessed major inconsistencies in treatment approaches in my workplace that differed according to a patient's body weight. For example, in my eating disorder clinic we prioritized restoring the patient's relationship with food and their mental health. In weight management programs, weight was used as a primary determinant of health. In fact, restrictive eating practices (the same practices I was treating in my eating disorder program) were recommended. This discrepancy that I observed and storied from the patient's I treated inspired the research I do today.

### **What areas in dietetics do you think will become more important/growing in the future?**

Dietetics practice has historically used a weight normative approach. That is, there is emphasis on weight and weight loss when defining health and well-being. With increasing recognition of the harms associated with weight bias in health care, more clinicians are adopting weight

normative approaches (such as Health at Every Size®). In weight normative approaches, there is emphasis on viewing health and well-being as multifaceted, while directing efforts toward improving health access and reducing weight stigma. My hope is that future dietetics professionals will be exposed to these approaches in their training and will be taught skills for incorporating these and other patient-centered approaches into their practice.

**What resources would you recommend to students who are interested in learning more about weight inclusivity and why it is so important?**

I would recommend the Association of Size Diversity and Health (ASDAH) website for folks who are interested in learning more. <https://www.sizediversityandhealth.org/>

There is a ton of information about the HAES approach and resources like books, journal articles, etc. on that site.

Here are some books, articles, and podcasts that I recommend:

- Book: Body Respect: What Conventional Health Books Get Wrong, Leave Out, and Just Plain Fail to Understand about Weight (<https://lindabacon.org/body-respect-book/>)
- Book: The Intuitive Eating Workbook: Ten Principles for Nourishing a Healthy Relationship with Food (<https://www.intuitiveeating.org/our-books/>)
- Podcast: RD Real Talk (<http://heathercaplan.com/rd-real-talk-podcast/>)
- Podcast: FoodPsych (<https://christyharrison.com/foodpsych>)
- Article: Ulian, et al. Effects of health at every size® interventions on health-related outcomes of people with overweight and obesity: a systematic review. *Obesity Reviews*, 2019.
- Article: Tylka, et al. The Weight-Inclusive versus Weight-Normative Approach to Health: Evaluating the Evidence for Prioritizing Well-Being over Weight Loss. *Journal of Obesity*, 2014.