

A doctor's words can enforce weight stigma

September 26 2011



The language that health care providers use when discussing a child's weight with parents can reinforce negative weight-based stigma and jeopardize discussions about health, finds a study from the Rudd Center for Food Policy & Obesity at Yale University. The study, which is the first to assess parents' perceptions of common terms used to describe excess weight in children, shows that parents prefer that doctors use the terms "weight" and "unhealthy weight" rather than "fat," "obese," and "extremely obese." The study appears in the October issue of *Pediatrics*.

The researchers surveyed American parents with children ages 2-18 years, asking their opinions about 10 common terms used to describe

excess body weight in children. These terms included "extremely obese," "high BMI," "weight problem," "unhealthy weight," "weight," "heavy," "obese," "overweight," "chubby," and "fat." Parents were asked if they considered these terms desirable, stigmatizing, blaming or motivational to lose weight.

The study found that parents perceived the terms "weight" and "unhealthy weight" to be most desirable, and "unhealthy weight" and "weight problem" as the most motivating to lose weight. In contrast, the terms "fat," "obese," and "extremely obese" were consistently rated as the most undesirable, stigmatizing, blaming, and least motivating.

In addition, when asked how they would react if they felt their child was stigmatized about his/her [weight](#) from a doctor, 35% of parents reported that they would find a new doctor and 24% would avoid future appointments with that doctor.

[Health care providers](#) play a key role in obesity prevention and treatment, but these findings suggest that their efforts could be undermined if they use stigmatizing language that can hinder important discussions about children's health.

"Using weight-based terminology that patients find desirable and motivating, and avoiding language that parents perceive to be stigmatizing and blaming, is an important first step in facilitating positive, productive discussions about health with families," said lead author Rebecca Puhl, director of research at the Yale Rudd Center.

The authors assert that rather than making assumptions about weight-based language to use with parents, providers should ask [parents](#) and children about preferred weight-based terminology they would feel comfortable using in patient-provider discussions.

Provided by Yale University

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