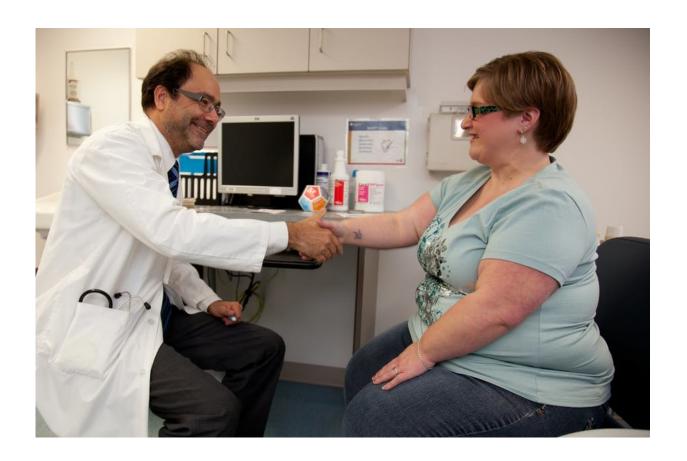# How stigma in the healthcare system is undermining efforts to reduce obesity

March 23 2018, by Stuart W. Flint And Emily Oliver

Research shows healthcare providers may offer weight loss advice in place of medical treatment. Credit: Canadian Obesity Network

Obesity is a [global public health concern](#) due to its associations with an increased risk of poor mental and physical health. This is why attempts

to prevent and treat obesity – especially in children – have become a focus of public health policy.

But these good intentions are being undermined by persistent and widespread negative stigma against obesity. People with obesity are stigmatised as lazy, gluttonous, unintelligent, unattractive, and lacking in social skills. None of these stereotypes are supported by research. So if not based on evidence, why are these beliefs so widespread?

Obesity is a complex condition and is influenced by a number of controllable and uncontrollable factors. But despite this, the media, public, and "shock and shame" campaigns focus overwhelmingly on the contribution of [individual choice and responsibility].
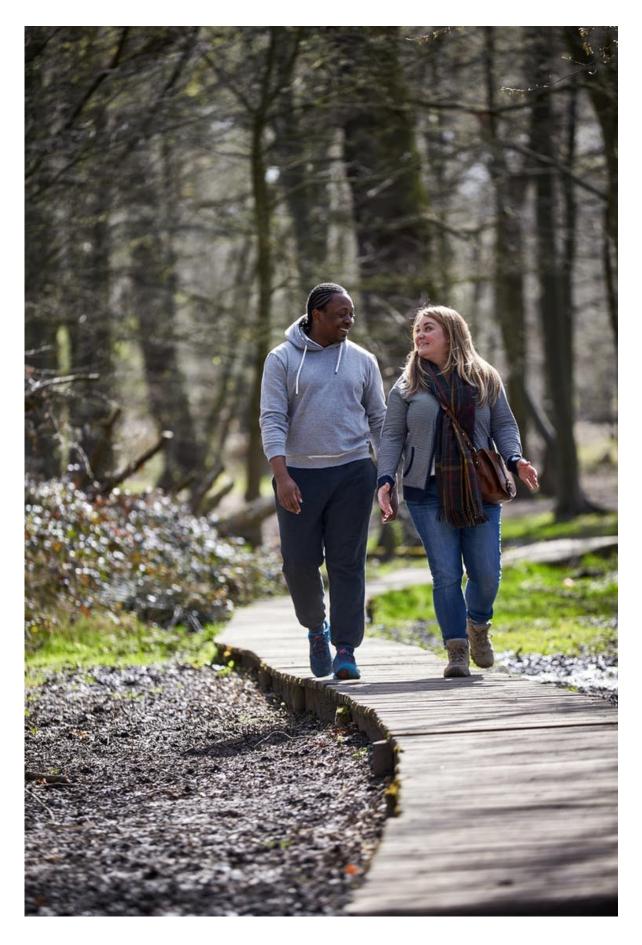
The assumption is that if someone has obesity, it is because they don't know better, don't want to be healthier, and don't have the ability to self regulate. These assumptions are inherently linked to stereotypes and are likely to exacerbate stigmatising attitudes towards people with obesity.

Stigma that perpetuates blame can harm people with obesity in a number of ways. It can lead to self-loathing, a reduction in confidence, avoidance of exercise, and an increased risk of engaging in self-harm. Both directly and indirectly, stigma reduces the health of those who experience it.

Implications of weight stigma

Healthcare settings should be the ideal place to advise and support people to make informed choices about their health. With respect to obesity, this might include helping a patient assess contributory factors to their weight. Or might mean going beyond lifestyle factors to consider broader underlying health problems.

Non-stigmatising image of a couple walking in the woods. Credit: World Obesity Federation

While in principle this should be the patient's experience, the reality for people with obesity is far more challenging. People with obesity are often exposed to stigmatising attitudes and discriminatory behaviours from healthcare professionals. These include receiving less clinician time, being less likely to receive appropriate treatment, and in some instances not being offered certain treatments.

This can impact patient engagement, and in turn reduce funding for services specifically to support weight management. As such, people with obesity are being excluded from, or are less likely than non-obese people, to receive care and treatment that is likely to help improve health. These effects are compounded by the wider stigmatising beliefs held by the public that reduce the likelihood of individuals with obesity seeking help in the first place.

Breaking the stigma

For this to change, everyone needs to recognise and reflect on their own weight stigmatising attitudes and beliefs – because we all have a role to play in the perpetuation of stigma in society. We need to notice and care about stigma – how it is being conveyed, how we can challenge it, and how we can work to develop non-stigmatising environments.

This might involve choosing to support products and companies that are non-stigmatising in their advertising, and being critical of media discourse that focuses on single-factor causes of obesity.

On top of this, those involved in public health promotion or health service delivery can explicitly challenge stigma in their communications and campaigns. Collectively, the sector can develop approaches that view health holistically, support patients' dignity, as well as their right to make informed choices about whether or not to engage in treatments.

This is important, because it is vital weight stigma is tackled as it is causes psychological harm, and results in unfair and discriminatory treatment that negatively influences patient and public health. And inadvertently, this stigma is undermining efforts to reduce obesity and more generally support people's health.

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