

# How obesity discrimination is just as common as racism

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Ximena Ramos Salas, managing director of Obesity Canada, says weight bias and discrimination are as pervasive as racism, even among health-care professionals. Credit: Virginia Quist

Ever notice how the proverbial "bad guy" in children's cartoons and movies tends to be a larger size? Or how popular TV shows tend to portray fat people as comedic, lonely or freaks?

Start paying attention and you will notice the discriminatory trend in media called "fattertainment," said Ximena Ramos Salas, a managing director of University of Alberta-based Obesity Canada, a national registered charity dedicated to reducing weight bias.

Weight bias, she explained, is an individual's attitudes or beliefs about a person because of their weight—for example, "That person is so fat. They are clearly lazy and unmotivated and lack willpower."

"When we extrapolate from many U.S.-based studies, it's clear that weight bias is as common, if not more common than racism," she said. "And media isn't the only place where [obesity](#) discrimination occurs. In fact, health-care professionals, thanks to a lack of training in schools, are among the worst perpetrators."

Ramos Salas and colleagues at Obesity Canada say weight bias has been the single most significant obstacle they've faced in trying to develop a comprehensive national strategy for obesity prevention and management for the last 10 years. Her Ph.D. research also showed that the public health system forms policies that may have negative consequences for people living with obesity, who, in turn, find public health messaging unhelpful and stigmatizing.

"Health-care professionals and society in general need to recognize that obesity—defined by the World Health Organization as abnormal or excess fat accumulation that impairs health—is a chronic health problem, not a self-inflicted lifestyle choice," explained Ramos Salas.

She added that not everyone who lives in a larger body has obesity, and the idea that we categorize people based on their size as healthy or unhealthy is not accurate.

"However, for those who are living with obesity, there isn't a cure. It's a

disease that these people will live with forever, so the key is, how can we help them manage their chronic disease like we would any other chronic disease, such as hypertension or cancer, and how can we make sure they're not discriminated against?"

For starters, awareness needs to be raised around the fact that many factors contribute to obesity beyond diet and exercise, she said.

"Not everyone will develop obesity for the same reasons, and when we make assumptions about lifestyle choices that aren't true, the consequences are quite damaging."

## **Why shaming is wrong**

"We know from population-based health studies that experiencing weight bias and discrimination can cause psychological problems such as negative self-esteem, lack of body confidence and stress," said Ramos Salas.

In turn, that can cause avoidance of health-promoting behaviour. For example, people living with obesity may avoid going to the gym or seeing their doctor for fear of being shamed and blamed, she said, adding "stigmatization and shaming only increases health disparities."

It can also increase social disparities. Ramos Salas pointed to research showing that kids in educational settings who experience weight bias from teachers also encounter lower expectations from teachers.

"That has ramifications for social development, learning and future socio-economic status," she said.

## **Accepting not the same as promoting**

"A common concern is that if we accept body diversity, we are promoting obesity, but that's not true," added Ramos Salas.

Accepting someone with a larger body requires us to embrace the fact that everyone comes in different shapes and sizes, and that as long as people who have larger bodies do not have health issues, they don't need to lose weight, she said.

"In fact, helping people who have obesity isn't necessarily about weight loss either, but tackling other ways to improve their health and well-being," she said.

"Certainly, making people feel bad about their body is not helpful. We need to make them feel accepted and accommodated, whether that's making sure kids at school have big enough seats or making sure there are MRIs big enough to fit people with obesity in hospitals."

She added that what's at stake is not only a person's individual health, but also population health outcomes.

## **Damaging views**

- Weight bias: an individual's attitudes or beliefs about a person because of their weight. For example, "That person is so fat. They are clearly lazy, unmotivated and lack willpower."
- Weight stigma: the social stereotypes we have about people with obesity and about obesity. For example, "People with obesity eat unhealthy foods and do not exercise; they don't care about their own health."
- Weight discrimination: when people act on their own individual biases and the social stereotypes of people with obesity, and treat [people](#) differently because of their [weight](#). It can have serious consequences, said Ramos Salas: "Less promotions in the

workplace, lower salaries, lower expectations by teachers for children with obesity in school, and lack of access to dignified and respectful care in [health](#)-care systems."

Provided by University of Alberta

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