

Study points to need for care in inappropriate use of stigmatising terms in weight management

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A large quantitative research study has found using the terms "weight" or "high BMI (body mass index)" to describe excess fatness was rated as

less stigmatising and less blaming than commonly used medical terms, such as "fat" or "obese."

Researchers from Victoria University of Wellington and the University of Otago, Wellington recruited 775 adults, including 330 [health care professionals](#) and health sciences students and 440 non-health (lay) adults to complete questionnaires for the study. Participants were asked to rate the degree to which specified terms (fat, chubby, obese, high BMI, morbidly obese, bariatric, heavy, large, overweight and [weight](#)) were stigmatising, blaming and preferred terms. Participants were also asked to rate terms most likely to motivate a person to lose weight.

This comes at a time when there is heightened awareness of the harms of discrimination, bias and stigmatising language in relation to people with excess adiposity.

A senior lecturer at Victoria University of Wellington, Dr. Caz Hales, says there were significant differences between the perception of terms used to describe people of different body weight with respect to stigma, blame, motivation to lose weight and desirability.

"Participants rated 'weight' as the least stigmatising term, with 69 percent rating 'weight' as 'not at all' stigmatising. On the contrary, 'morbidly obese' and 'fat' were rated as the most stigmatising terms, with 42 percent and 30 percent of participants rating 'morbidly obese' and 'fat' as 'very stigmatising.'"

"Weight" was rated as the term least likely to motivate someone to lose weight, with 51 percent rating it as "not at all" motivating. By contrast, 42 percent and 26 percent of participants rated the terms, "morbidly obese" and "obese" as "very motivating" terms to encourage someone to lose weight. The researchers say this is concerning, as more stigmatising terms are not helpful to people wishing to lose weight (Tomiyama et al,

2018).

A senior lecturer at the University of Otago, Wellington, Lesley Gray, says the terminology used by [medical professionals](#) has a significant impact on an individual's perceptions of weight and experience of stigma.

"The use of stigmatising terms when referring to people with excess weight adds to the existing discrimination and weight bias in healthcare settings, particularly when the terminology is associated with broader moral perceptions and judgments about the individual being described," she says.

Dr. Hales adds, "Whichever term is selected, conversations between medical professionals and patients need to be respectful, appropriate to their personal and clinical situation and the language used must support meaningful non-stigmatising dialogue."

The authors cautioned that while "weight" and "high BMI" were the terms most commonly preferred, neither was meaningful in accurately describing the clinical relevance or health status of the person during patient consultations.

Ms Gray says: "Language has the ability to harm and must be applied with care, particularly in first encounters."

"Dissonance in naming adiposity: a quantitative survey of naming preferences from a convenience sample of health professional and lay population in Aotearoa New Zealand," is published in the June 7, 2019 issue of the *New Zealand Medical Journal*.

More information: Dissonance in naming adiposity: a quantitative survey of naming preferences from a convenience sample of health

professional and lay population in Aotearoa New Zealand, *New Zealand Medical Journal*. www.nzma.org.nz/journal/read-t...496-7-june-2019/7896

A. Janet Tomiyama et al. How and why weight stigma drives the obesity 'epidemic' and harms health, *BMC Medicine* (2018). [DOI: 10.1186/s12916-018-1116-5](https://doi.org/10.1186/s12916-018-1116-5)

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