

**How to Talk about Healthy Weight and Healthy Eating:
A Cross-Disciplinary Dialogue on Messaging to
Promote Healthy Behaviors and Positive Body Image
March 29, 2019**

**Prepared by the HHS Office on Women's Health
Executive Summary**

Introduction and Objectives

The Office on Women's Health (OWH) convened a meeting on Friday, March 29, 2019 from 9:05 AM to 4:00 PM at the Renaissance Hotel in Washington, DC. The purpose of the meeting was to establish a cross-disciplinary dialogue between experts in the fields of obesity prevention and eating disorder prevention, who came together to discuss messaging to promote health behaviors and positive body image. OWH established three objectives for this meeting:

1. To open a dialogue with obesity and eating disorder prevention groups;
2. To educate federal agency staff on how to integrate information on eating disorders into obesity messaging; and
3. To collect input about messaging related to weight stigma as well as other considerations about weight stigma as they relate to various programs, grants, and initiatives.

The meeting began with two presentations from researchers whose work focuses on the harmful effects of weight stigma. Meeting participants then split into three breakout groups led by facilitators, where they discussed topics related to body image and dietary behaviors. All of the participants reconvened at the conclusion of the meeting for a debrief and closing remarks.

Presentations

Dr. Rebecca Puhl gave an overview of her ongoing research, which focuses on weight stigma and discrimination from a perspective of emotional and physical health. In her research, Dr. Puhl seeks to address the relationship of these issues to societal settings and policy-level strategies. She cited a number of studies suggesting that pervasive weight stigma and stereotyping are related to poor health outcomes such as maladaptive eating patterns and stress. Furthermore, weight stigma is related to decreased effectiveness of provider-patient communication and often results in decreased health care usage among individuals who perceive weight discrimination in clinical settings. Dr. Puhl recommended that messaging about weight should seek to support and empower individuals. She also stated that for such messaging to be effective, it should be incorporated into all levels of society from individual action to public policy.

Dr. Janet Tomiyama reviewed her research on the relationship between weight stigma and stress. She proposed a cyclical model of weight stigma and stress response, explaining that

cortisol, a hormone released in response to stress, is associated with weight gain and increased eating, which in turn leaves individuals more prone to experiencing stressful weight stigmatizing events. She concluded by pointing out that obesity prevention is largely dependent on the prevention of stigmatizing messages, and that existing interventions to decrease weight stigma are minimally effective. As a result, there is a need for new perspectives and insights in the pursuit of reversing weight stigmatizing messaging.

Breakout Group Sessions

The meeting participants were divided into three groups. Each group discussed body image during the first breakout session and dietary behaviors in the second breakout session. Facilitators guided the participants with a set of questions that fostered open conversation. Although the content of these discussions differed among the groups, common themes emerged.

The participants concurred that a successful public health campaign to promote body image and healthy behaviors should decouple self-worth from weight and appearance. Furthermore, effective messaging should frame health in terms of what the body is capable of achieving rather than what the body looks like. Across groups, participants also agreed that the moralization of certain foods as “bad” or “good” contributes to weight stigma and is an ineffective way to encourage healthy dietary choices. Additionally, they concurred that there is no evidence to suggest that informing patients of their BMI or their “obese” weight status is an effective way to motivate behavior change.

In general, the participants concurred that modeling is one of the most effective ways to promote healthy body image and dietary choices in young people. They cited the importance of parental guidance in fostering healthy habits beginning in early childhood, and they agreed that a successful public health campaign should aim to educate parents about modeling healthy behaviors and acting as advocates for their children. The participants also noted that peers, teachers, sports coaches, and celebrities could be valuable in influencing youth attitudes towards body image and weight stigma.

Most of the participants discussed the toxic role of the food industry in perpetuating weight stigma, particularly among adolescents. There was consensus that the food industry and the tobacco industry historically have targeted young people, and participants agreed that there is potential to replicate youth rejection of the tobacco industry by educating adolescents about targeted marketing strategies in the food industry.

All three groups discussed differences between messaging in clinical settings versus public health contexts. They agreed that the word “weight” should never be used in a public health campaign about health and body image, while there was some contention about the use of the term by health care providers. They agreed that the focus should instead be on health behaviors instead of weight. The groups also agreed that the term “health” is better than “healthy” because the latter can be perceived negatively or may introduce a dichotomy between concepts of “healthy” and “unhealthy.” The groups also agreed that “size diversity”

and “body acceptance” are valuable, effective phrases to use in successful, inclusive messaging for both the eating disorder community and the obesity community. Most groups expressed general support for existing campaigns such as body positivity, Health At Every Size, and fat activism; however, there was disagreement about the stigmatizing nature of the word “fat” and whether all messages by these campaigns promote health. They concurred that clinicians should ask patients their preferred terms for discussing weight before broaching the topic, which can be sensitive for many people.