

International studies reveal common experiences of weight stigma

by Leigh Ann Green

Findings suggest that weight stigma impacts both the psychological and physical health of individuals with high weight.

- **International studies show both internal and external implications of weight stigma.**
- **Participants report experiencing high occurrences of weight stigma from family members and healthcare professionals.**
- **A reluctance to pursue adequate healthcare can add another issue to the list of adverse health effects related to obesity.**

Along with increasing obesity rates over the past few years, research has shown a parallel increase in [weight stigma and bias](#). Weight stigma, which includes negative stereotypes, prejudice, and unfair treatment based on a person's weight, is now recognized as a [global](#) health issue. International comparative studies on weight bias have been lacking. To remedy this social disconnect, two recent studies conducted by the University of Connecticut, and published in [SSM-Population Health](#), found that study participants across six Western countries have experienced weight stigma and negative social issues associated with it.

Common, key results

The international studies systematically compared weight stigma reports from nearly 14,000 participants enrolled in WW International (formerly Weight Watchers) in Australia, Canada, France, Germany, the United Kingdom, and the United States. Surveys assessed each individual participant's history of weight stigma, the type of stigma experienced, including teasing and discrimination, internalized weight bias, and incidences and perceptions involving healthcare behaviors in reaction to the individual's weight.

Results from the studies reveal:

- More than half of the participants (56 to 61%) across all six countries reported having experienced weight stigma.
- Family members were the most common source of weight stigma across each country. Over 75% of participants reported experiencing weight stigma from family members.
- Approximately two-thirds of all participants reported perceived negative weight bias from doctors.
- Participants with higher internalized weight bias reported greater healthcare avoidance and increased perceived judgment from doctors due to obesity.

Internalized weight bias is a common issue among people with a higher body weight. Applying a negative stereotype to oneself and engaging in self-devaluation based on one's weight results not only in negative [psychological consequences](#) but also has the potential to seriously impact the individual's

[physical health](#). Body-related shame and guilt, along with [a reluctance](#) to pursue adequate healthcare measures, are often the results of this internalized bias.

Participants with higher internalized weight bias admitted greater healthcare avoidance, increased perceived judgement from healthcare providers, and lower quality of healthcare. They also reported feeling less heard and respected by doctors. These incidences led to participants across all six countries avoiding routine checkups.

Study limitations and strengths

Researchers acknowledge some limitations to these studies. For example, the data collected relied on self-reported recall of stigma and healthcare experiences. Also, there could be an element of self-report bias present in the results since participants may be more likely to negatively interpret appraisal cues. Another possible limitation included the fact that this data was collected during the COVID-19 pandemic, a time when general positivity across the world was lower than usual.

Conversely, there were multiple strengths associated with these studies. Researchers noted that the large sample size and consistent multinational comparisons contributed unique insights to previously scant cross-cultural research regarding weight stigma.

Roles of family and healthcare

Conclusions from the studies recognize the need for a two-fold focus for the future. The first is a need to address weight stigma among families.

[Rebecca Puhl](#), lead author of the study, said, “The fact that family members are such common sources of weight stigma across these countries indicates a collective need to address weight stigma within the family environment, and to help families engage in more supportive communication with their loved ones. For many people, these experiences begin in youth from parents and close family members, and they can last for many years and have long-term negative consequences.”

The second area of focus should revolve around the improvement in communication and engagement between health professionals and people with obesity. Methods to certify knowledge of weight stigma and its harmful side-effects need to be developed and facilitated throughout the medical community. Education and training are critical to these efforts and should be implemented across all countries.

“Our results also provide a compelling reason to step up international efforts to reduce weight biases held by medical professionals. We must prioritize efforts to establish a healthcare culture free of weight stigma, and we also need to work collaboratively to develop supportive interventions to help people when they do experience this stigma,” said Puhl.