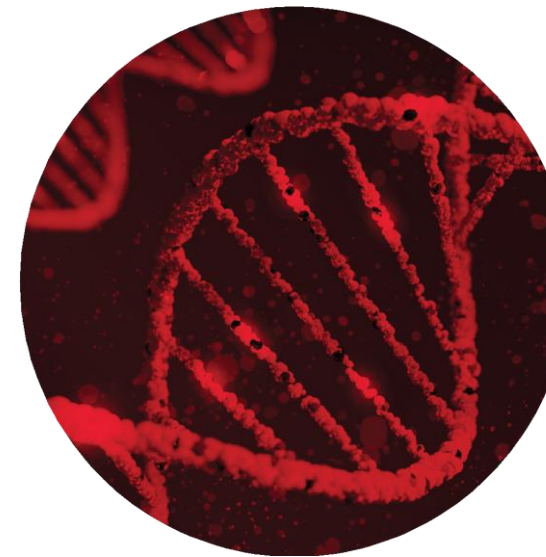
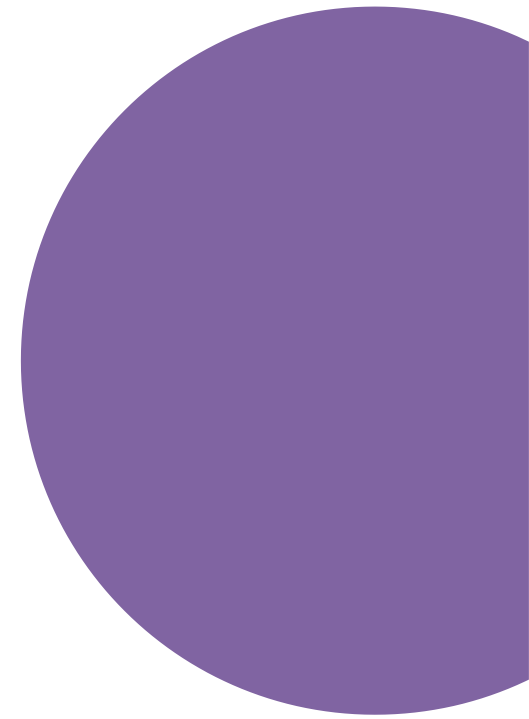
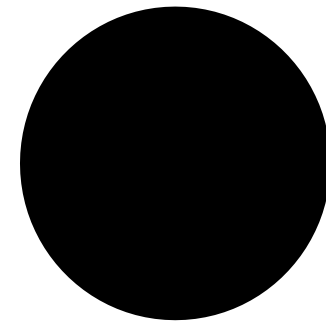




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# Obesity & Stigma:

Why we need to change the way with talk  
and think about obesity

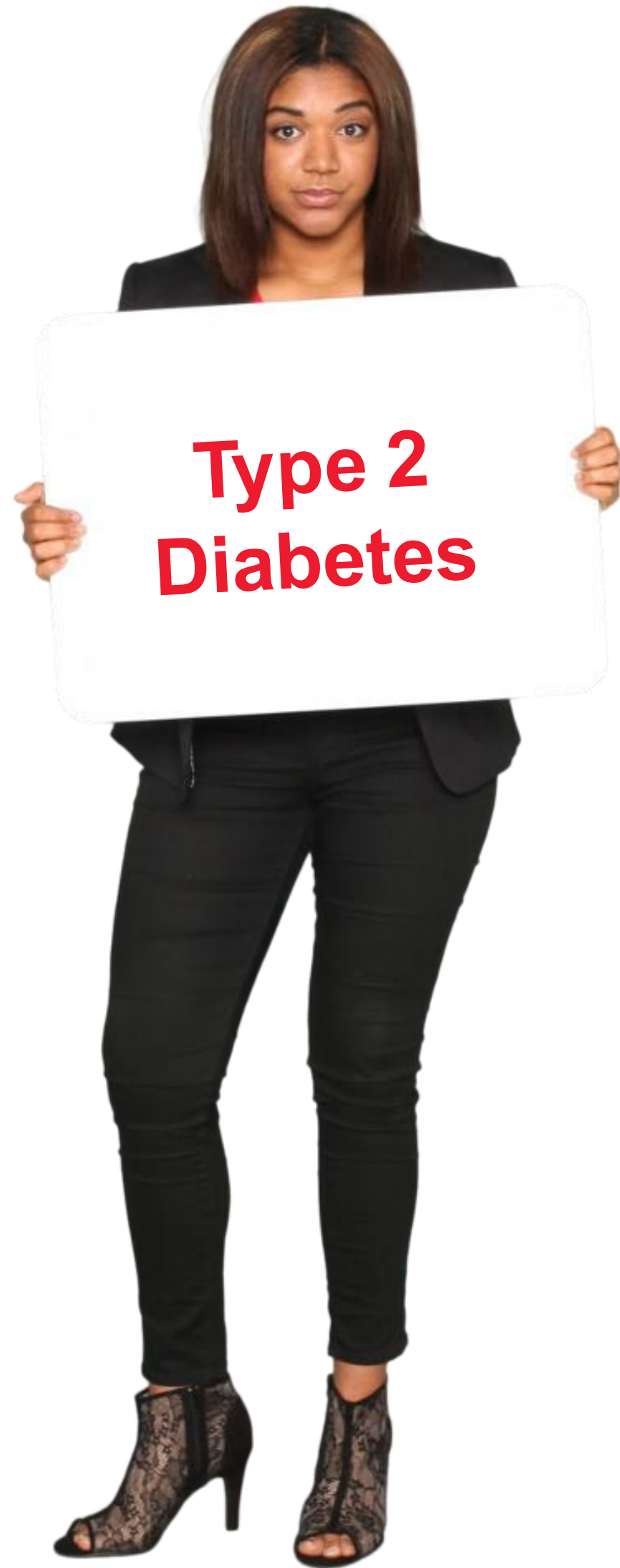
**Louisa Ells**

Professor of Obesity

Co-director of the Obesity Institute







**Why I refuse to let my daughter be taught by a fat teacher:** Writer Hilary Freeman says it is time for some home truths about obesity

Source:



**Heffalump traps will clear the NHS of fatties.** For years I've been accused of obesity fascism, but at last ideas like narrowing the doors of pubs are being listened to

Source:



**Stigma occurs  
across society**



“He [the GP] said in front of [daughter],

**‘God she’s obese, how on earth can you let her get that size?’**

You know, **‘You’ve just simply got to cut down, you’re giving her the wrong foods,’”**

**“Do you realise how much of a health issue that is?’**

You know, **‘She shouldn’t be that size’”**



**“Is overweight and obesity always just because of eating too much or taking insufficient exercise? The answer is almost always yes.”**

Medicine for Managers

Paul Lambden

## Obesity – The problem

Two-part commenta  
m's biggest health  
are overweight and  
0 children in recep

**O**besity is  
expecta  
The fast  
responsibility fo

One estimate  
suggests that over  
two billion meals  
from fast food  
outlets are  
consumed annually.

The cost to the NHS  
of obesity and its

**The correct answer is almost always NO!**

**We know that obesity is a highly complex chronic disease...**

In the  
transport by car or  
means and engaged in roles  
which are largely sedentary,  
many people have every  
opportunity to consume

at obesity and its management. It has become one of the  
associated deaths up to 30,000 or more a y  
seriously, recent figures show

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% in 2023.

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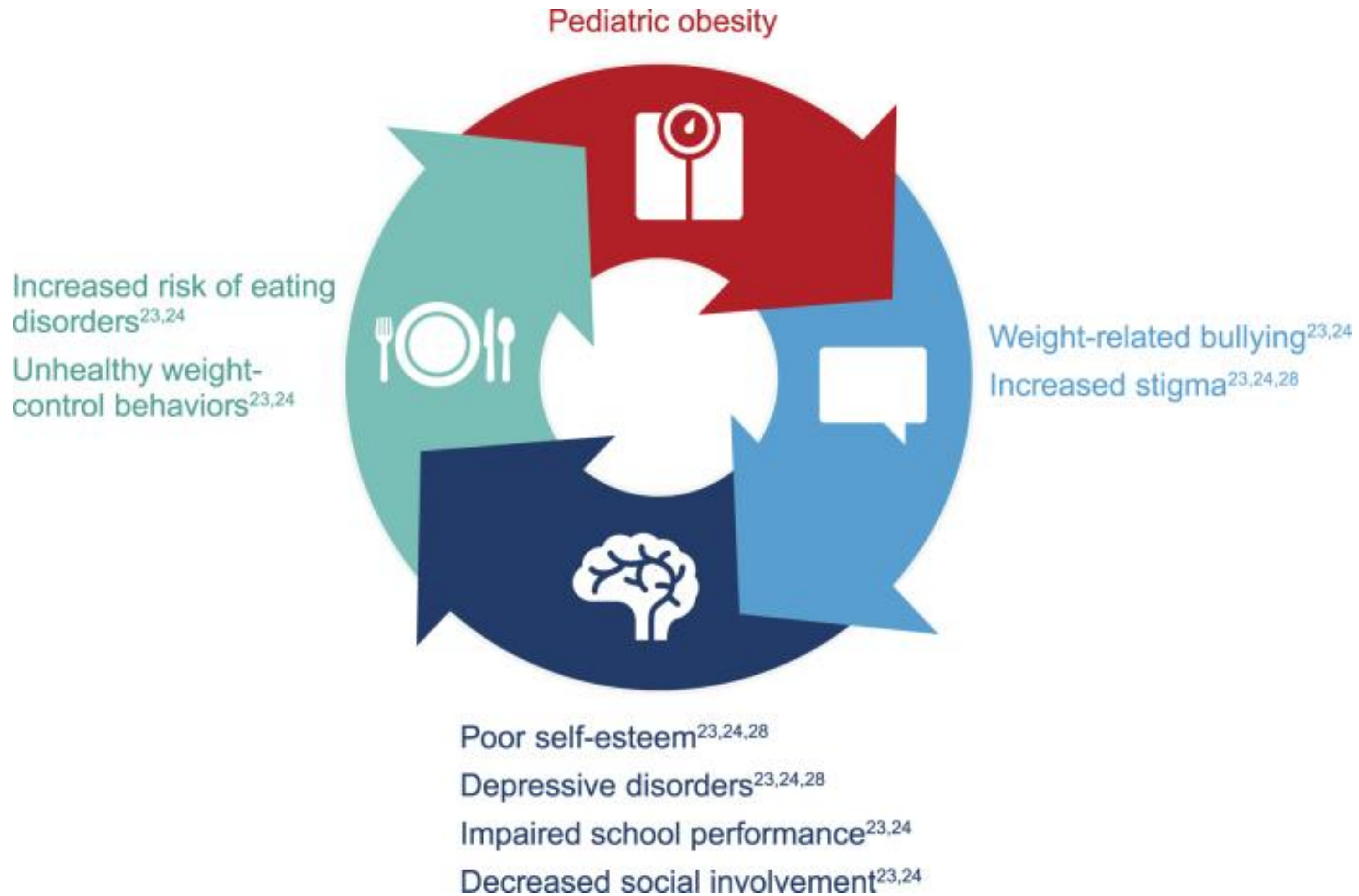
easy

**Weight stigma  
causes physical  
and  
psychological  
harms  
= health care  
avoidance**



Thompson, I., et al (2018). A review of the empirical research on weight-based bullying and peer victimisation published between 2006 and 2016. *Educational Review*, 72(1), 88–110. <https://doi.org/10.1080/00131911.2018.1483894>

**The negative feedback loop resulting from Paediatric Obesity**



From: Haqq AM, Kebbe M, Tan Q, Manco M, Salas XR. Complexity and Stigma of Pediatric Obesity. *Child Obes.* 2021 Jun;17(4):229-240. doi: 10.1089/chi.2021.0003. Epub 2021 Mar 29. PMID: 33780639; PMCID: PMC8147499.

# What is Obesity stigma?

- Characterised by prejudiced, stereotyped, and discriminatory views and actions towards people with obesity, often fuelled by inaccurate ideas about the causes of obesity

Puhl RM, Heuer CA. Obesity stigma: important considerations for public health. *Am J Public Health.* 2010;100(6):1019–1028. doi: 10.2105/AJPH.2009.159491

- There are many contributing factors of obesity stigma – from across media politics and industry

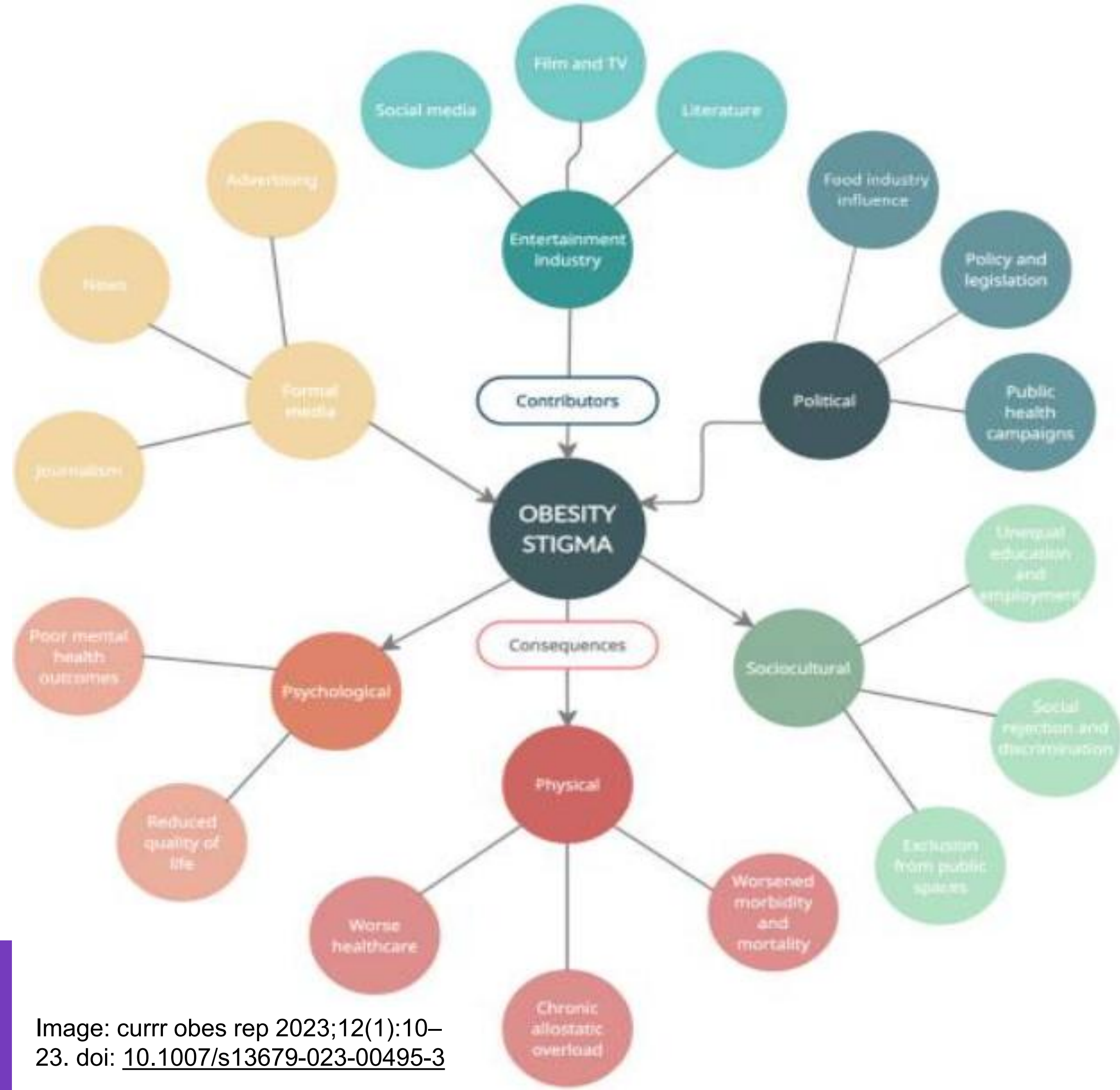


Image: *curr obes rep* 2023;12(1):10–23. doi: [10.1007/s13679-023-00495-3](https://doi.org/10.1007/s13679-023-00495-3)



# Different types of Weight Stigma:

- **External stigma: involves public stigma, such as prejudices, stereotypes, and hostile attitudes or behaviours towards individuals because of their weight.**

→ this can lead to weight related bullying, victimization and discrimination.

- As a direct consequence of weight stigma experiences, people living with obesity may internalize public weight stigma

- **Internal stigma: is where weight-based negative attitudes and stereotypes to are applied to oneself**

→ this can lead to poorer mental health (such as depression, anxiety and lowered self-esteem), poorer physical health (such as worse cardiometabolic health), and disordered eating behaviours.



# Prevalence of obesity stigma in the UK:

The 2018 All-Party Parliamentary Group on Obesity reported that:

- **88%** of people with obesity who took part in their survey have **been stigmatised, criticised or abused as a result of their obesity.**
- **94%** of all respondents believe that there is **not enough understanding about the causes of obesity amongst the public, politicians and other stakeholders.**
- **42%** of people with obesity **did not feel comfortable talking to their GP about their obesity.**



## Recommendations to address obesity stigma:

- *Distinguish between body size and obesity.*

To reduce the conflation of health with weight and size, health providers, advocates, and the media should use an accurate definition of obesity that moves beyond a solely BMI-based measurement and ensure that obesity is used to refer only to individuals with an obesity diagnosis

- *Use person-first language and consider individual language preferences*
- *Use non-stigmatizing language and imagery.*
- *Engage in weight-neutral health promotion.*
- *Engage in legislative and policy efforts to reduce weight stigma.*
- *Promote human rights-based approaches to tackle weight stigma and discrimination.*
- *Raise awareness of weight stigma and its consequences*
- *Continue to build a strong evidence base through robust studies in collaboration with people with lived experience.*

# NICE (2025) NG246 Addresses stigma through the new principles of care



## Overweight and obesity management: Principles of care

2

### Support me

- **Talk to me** in a sensitive, person-centred, developmentally appropriate and non-judgemental way.
- **Identify and explore** the terms I would prefer you to use.
- **Focus** on improvements in my health and wellbeing rather than simply talking about weight and obesity.
- **Stay positive**, supportive and solution based.
- **Take into account** my thoughts, views and cultural, religious or spiritual beliefs during our conversations.
- **Be mindful** of factors that apply to me that prevent or restrict weight loss (such as some medicines or comorbid conditions).
- **Ensure** my notes are up to date so other healthcare professionals know my views, what we have covered and agreed before, and why.

4

### Help me when we talk

- **Use** non-stigmatising language and images.
- **Ensure** anything you give me to read or watch is suitable and tailored to my particular needs, such as Easy Read literature.
- **Ensure** conversations and communications are appropriate for my age, maturity and level of understanding. For children and young people make sure information is accurate for age (for example, BMI centile).
- **Give me time** to understand and process the information I have been given.
- **Ask me** if I have any questions, and make it clear you are happy for me to ask them either now or later on.

1

### Respect me

- **Ask** my permission to discuss topics around overweight and obesity.
- **Respect** my choices, even if you do not agree with them.
- **Do not assume** all my symptoms are caused by my weight or obesity.
- **Explore** my decisions sensitively, or delay discussions to another time, if I do not wish to talk about any issue you have raised.

3

### Know about my life

- **Think about** my family history and weight-related complications.
- **Be aware** of my weight history (and for children and young people, growth history), and previous experiences of related problems (such as eating disorders).
- **Take into account** my experiences of weight stigma, bullying and adverse experiences.
- **Think about** my family and personal context: daily life, ethnicity, culture, money worries, special needs and disabilities, mental health factors and stage in life.
- **Be aware** of my current medicine use and medical history.
- **Find out** if I am ready and able to engage with change. If not, how can you help me?
- **Talk about** how my friends and family can help (this is especially important for children and young people).

5

### Understand how I feel

- **Think about** whether it is appropriate or important to discuss weight or obesity, or take measurements right now.
- **Think about** the impact on my body image or self esteem of taking measurements or the way they are done.
- **Understand** my weight may have been raised many times before.
- **Understand** that I might be affected by an eating disorder at any weight, and I might be vulnerable to disordered eating.
- **Be aware** of your own feelings, sensitivities and bias about weight and obesity.

World Obesity Day 2026 also advocates to address stigma...

**World Obesity Day** March 4

**8 Billion Reasons to Act on Obesity**

**8 billion reasons to act on obesity**  
Together we can change the story

The graphic features a diverse group of people of various ages and ethnicities smiling and standing together. The background is light grey with large, stylized purple and red shapes, including a yellow starburst. The text is prominently displayed in the upper left and center.

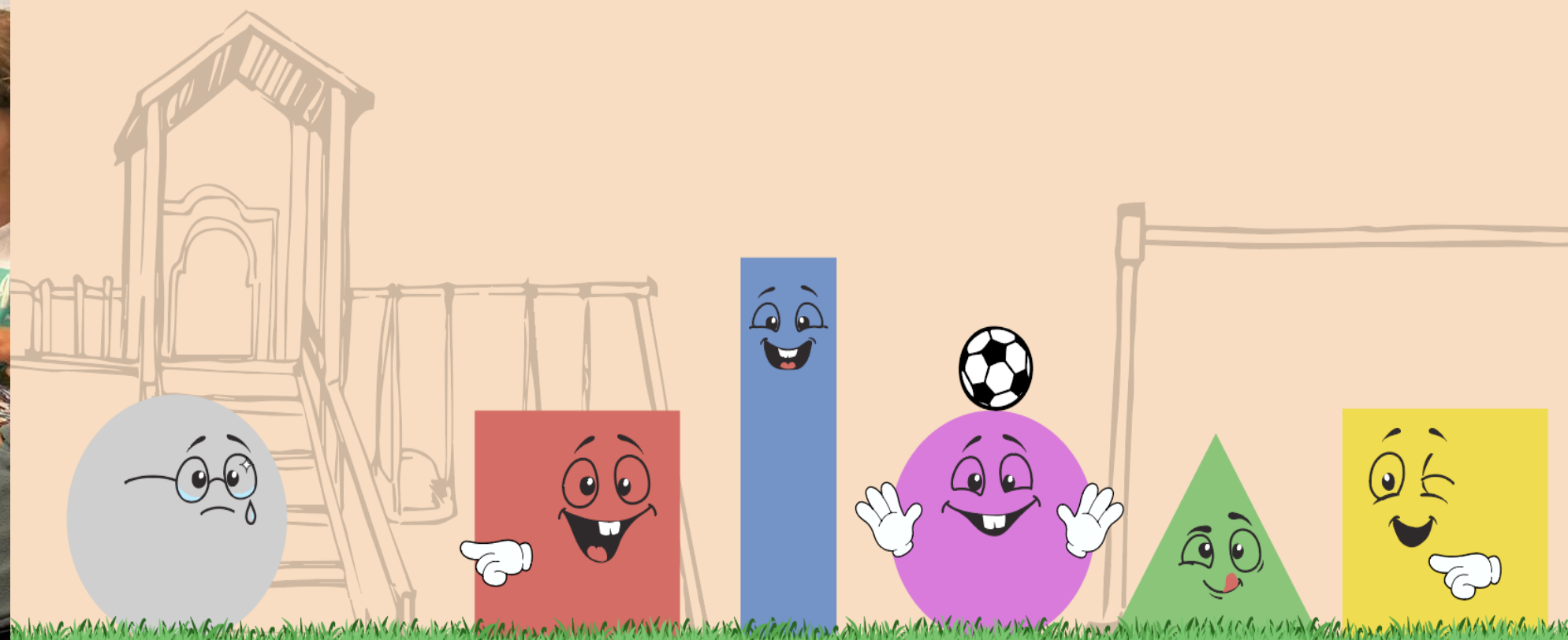
**We are committed to  
act on weight stigma  
and bias...**



# Co-designing a short film and teaching resources to address weight relating bullying in primary school children:



No matter what your shape or size...



**Every body deserves kindness**

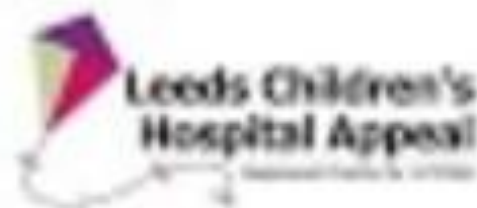
@Wrapped design agency

# Every body deserves kindness

A short animation to address body shape,  
size & weight related bullying in children.



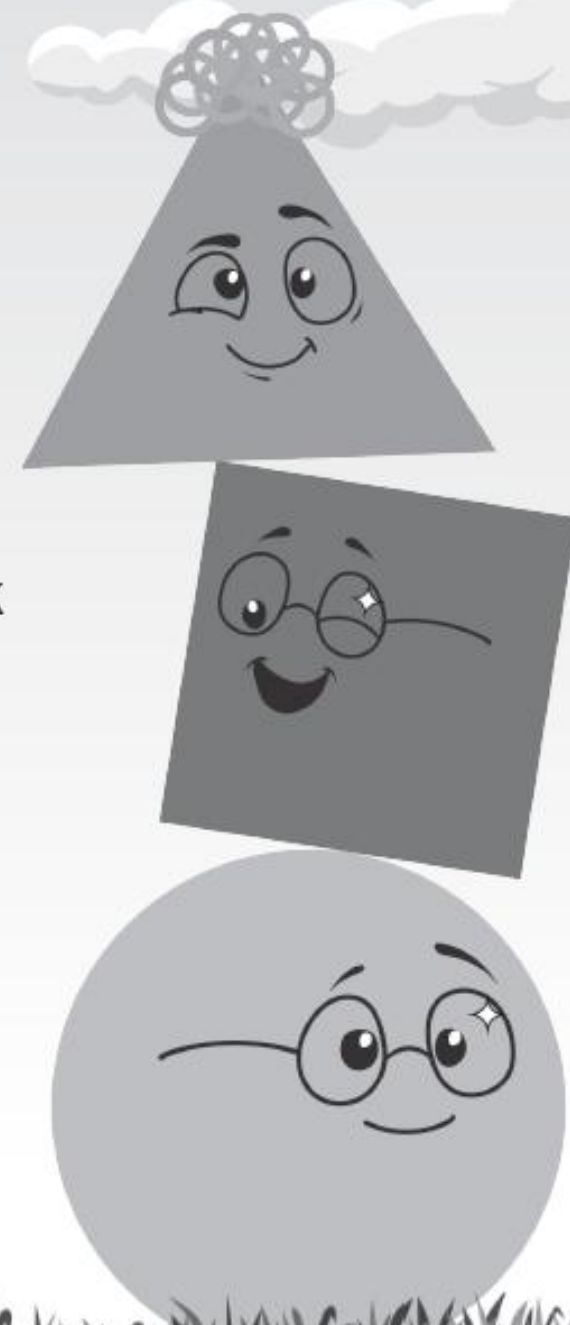
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OBESITY INSTITUTE



wrapped.  
CREATING & SUSTAINING CHANGE

Every body  
deserves  
kindness

Teaching Resource Pack



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## Impact so far...

Since launch in October 2025 it has now achieved significant reach:

- received by over 320 schools,
- downloaded over 1,600 times,
- incorporated into the anti-bullying alliance website,
- incorporated into the Food Active's weight stigma hub,
- incorporated into the healthy weight strategy partnership for Manchester
- Presented at international, regional and local conferences and workshops.

Most recently it also received a **silver award at the Northern Digital awards.**



## What people are saying...

Children said they liked the:

*“Circle for people, Different shapes for people, Good colours for people’s skins, Football outside because it is at playtimes that problems happen, Being best friends at the end, Part when it said ‘we can all be different’”*

Teachers said:

*“All children were focused watching the clip... and they had retained the information”*

Children’s weight management services said:

*“it’s a thoughtful and well-structured tool that addresses a sensitive topic with care and clarity. It’s evident that a lot of consideration has gone into making the content age-appropriate, engaging, and aligned with the PSHE curriculum.”*


*“This resource will be a valuable addition to any primary school setting, helping to foster a culture of respect and understanding from an early age. It’s a fantastic step forward in promoting body positivity and emotional well-being in the classroom.”*





## **NEXT STEPS**

- We are currently working with 6 young people, teachers, parents psychologists and weight management clinicians and researchers to co-design a new film to raise awareness of weight related stigma in adolescence.
- Please keep an eye on our social media and website for updates...



# Why addressing obesity & stigma is so important...

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[https://youtu.be/l7gl\\_50hUgQ](https://youtu.be/l7gl_50hUgQ)



# The importance of lived experience voices: Obesity Voices Hub

Our public and patient involvement and engagement hub

National Hub (over 300 members)

- Anyone with lived experience can become a member
- Any researcher, policy maker or practitioner can work with our hub members

We have free to access resources to support good PPIE:

- Welcome guide
- A Code of Conduct – for hub members and users
- Training films
- Blogs
- New compassionate media images

*“Nothing about us, without us”*



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## OBESITY VOICES:

Patient and Public Involvement  
& Engagement Hub

### Welcome Guide

for Patients and the Public who want to be involved in advising on and co-developing research, teaching and knowledge exchange activities

Obesity Institute:  
Improving the lives of people living with, or at risk of obesity



Find out more about OVH and sign up!



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**ANY QUESTIONS?**

**[l.ells@leedsbeckett.ac.uk](mailto:l.ells@leedsbeckett.ac.uk)**

**THANK YOU!**