

IMPROVING CLINICIAN-PATIENT COMMUNICATION

Ways to Reduce Weight Stigma in Clinician-Patient Communication

Weight stigma interferes with provider-patient communication and creates barriers to effective patient care. Patients of all body sizes deserve respectful, compassionate, and patient-centered care. The following strategies can help reduce weight stigma in clinical interactions and facilitate supportive and respectful communication with patients.

Recognize that obesity has a complex etiology, driven by the interaction of multiple factors beyond food intake and physical activity, many of which are beyond an individual's control. These include biologic factors, genetic factors, environmental influences, and social determinants of health.

Listen carefully to the patient's concerns, questions, and comments. Consider the patient's situation and context. Seek to understand their experiences and perspectives. Engaging in reflective listening can ensure your understanding and help patients feel more supported.

Recognize that many patients have implemented lifestyle changes in the past and have experienced limited weight reduction over the long term despite their hard work, motivation, and commitment. These experiences leave patients feeling discouraged, frustrated, and shamed in the medical system.

Use patient-centered language, and ask patients what words or terms they prefer to describe their body weight. Use their preferred terminology in your conversation.

Explore all causes of the patient's presenting problems. Avoid making assumptions that body weight is at the root of a patient's symptoms, and consider their concerns independent of body weight.

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Focus on health, rather than BMI. Instead of emphasizing weight loss, focus on the value of "non-scale victories". This could be improved mobility, quality of life, cardiometabolic risk factors, or other benefits of health behavior change.

Recognize that patients may have previously experienced weight bias in healthcare. They may be hesitant to discuss weight and anticipate stigma and judgment. Respectful, nonjudgmental communication is key in helping patients feel supported.

Provide feedback in a nonjudgmental way. Emphasize patient strengths, provide encouragement, and collaborate on developing a plan to promote further progress.

Respect a patient's decision about their body weight regardless of whether or not weight loss is an intended goal. If a patient does not wish to discuss their weight or pursue obesity treatment, respect this decision without judgment.



Collaborate with the patient to identify health behavior goals that are realistic and sustainable. Consider social, medical, emotional, economic, and other factors that could create barriers to their goals.

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What to Prioritize in Conversations About Weight-Related Health:

- Establish rapport and trust.
- Use sensitive, patient-centered language.
- Ask the patient's permission to discuss weight.
- Default to neutral words like 'weight', and ask patients what word(s) they prefer to discuss their weight.
- Engage in reflective, active listening.
- Prioritize health behaviors, health outcomes, and quality of life, rather than BMI or body weight.
- Discuss the benefits of healthy behaviors and how they impact quality of life and health status.
- Acknowledge the complex etiology of obesity.
- Respect the patient's freedom to make their own decision about whether or not they want to lose weight.
- Collaborate with your patient to identify realistic and sustainable health behavior goals.
- Keep the door open for future communication and ongoing support.



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What to Avoid in Conversations About Weight-Related Health::

- Avoid focusing only on a patient's BMI. In 2023, the American Medical Association adopted a policy clarifying the role of BMI as a measure in medicine, noting the limitations of BMI and supporting alternative measures for diagnosing obesity. The policy recommends that BMI be used in conjunction with other valid measures of risk such as measurements of metabolic factors, waist circumference and body composition.
- Avoid oversimplifying body weight regulation and phrases like "calories in, calories out" or "eat less and exercise more".
- Avoid making assumptions about a patient's current or past health behaviors.
- Do not assume that the patient wants to lose weight.
- Avoid weight-related labels or terminology that may evoke patient discomfort or perceived judgment.
- Avoid language that places blame or responsibility on patients for their weight.

Don't forget to...

- 1** Recognize your own attitudes and assumptions. Practice conscious awareness strategies to reduce the impact of unconscious bias on your communication with patients.
- 2** Ensure the environment is welcoming and comfortable for patients with higher weight, including the availability of appropriate medical equipment and comfortable seating for patients of all body sizes.
- 3** Provide adequate time for discussion (across several visits if needed) to ensure that conversations with patients are not rushed.

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