Making Language Patient-Centric

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Use neutral words to describe weight

- There is not a universally acceptable word or phrase for higher weight
- Default to neutral words



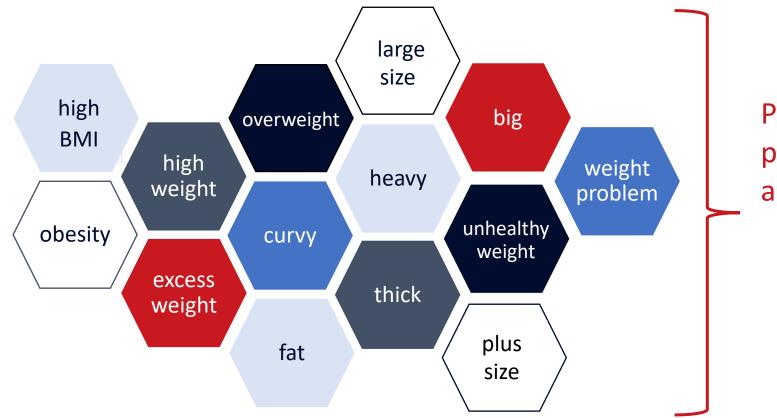






Puhl, Obes Rev 2020; Meadows & Danielstottir, Front Psychol 2016; Brown & Flint, Clin Obes 2021.

Respect diverse word preferences



People have different word preferences, which can vary according to their:

- sex
- race and ethnicity
- age
- weight status
- prior experiences with weight





Puhl, Obes Rev 2020; Meadows & Danielstottir, Front Psychol 2016; Brown & Flint, Clin Obes 2021.

Begin the conversation by asking permission

Acknowledge that weight is a sensitive topic, and why this discussion may be important for the patient's health:

> For some people, _____ [weightrelated health condition] can be influenced by their weight. I know that it can sometimes be difficult to discuss weight.

Ask the patient permission to discuss their weight:

Would it be okay if we talk about your weight today?

If the patient does not want to discuss weight, respect their decision:

That is okay.

followed by:

I'm here if you change your mind and would like to talk about this in the future.





Puhl, Obes Rev 2020; Stop Obesity Alliance, Why weight? A guide to discussing obesity and health with your patients.

Ask patients what words they prefer

If your patient agrees to discuss weight, ask what words they prefer you use:

You can say this:

People have different preferences when it comes to the words used to describe their body weight.

Are there words that you would prefer I use to talk about your weight?

or

What words would you feel most comfortable with as we talk about your weight?

Downloadable Handout

PATIENT-CENTERED LANGUAGE

Talking about body weight can be a challenge, for both patients and providers. Certain words to describe body weight may be perceived as judgmental and focusing blame on patients, which can in turn jeopardize important discussions about health. Many physicians report having little training on obesity and as a result, they may be reluctant to initiate conversations about weight or feel unsure about how to discuss weight-related health in ways that are empowering and supportive to patients. Using terminology that the patient feels most comfortable with can promote a more supportive and productive dialogue.

What Words To Use

Research indicates that people generally prefer neutral words to describe their body weight. Preferred terms typically include "weight", "high body weight", or "unhealthy weight". In contrast, people generally dislike words like "fat" or "obese". However, people's word preferences can differ according to their sex, race/ethnicity, age, weight status, and prior experiences related to their weight. There is considerable variation in people's word preferences. Body weight is a sensitive topic for many people, and the words they feel most comfortable with to describe their weight status or body size aren't always the same. This evidence highlights that healthcare professionals need to avoid making assumptions about what language to use when discussing weight with patients. Instead, it's important to use words that patients feel comfortable with.







Use patient-centered communication

Facilitate the conversation in a non-judgmental, respectful way:

How are you feeling about your weight?

How does your weight affect your quality of life?

I'd like to learn more about your experiences with weight and health behaviors. What would be helpful for me to know?

> Are there health behavior changes that you would like to make?

Let's create a plan together that works for you.





Miller & Rollnick, Motivational interviewing: Helping People Change 3rd ed., 2013; Freshwater et al., Obesity Pillars 2022.

People-first language for obesity

INSTEAD OF:	SAY:	Endorsed by:
He is obese.	He has obesity.	 American Medical Association American Academy of Orthopedic Surgeons American College of Obstetricians and Gynecologists American Society for Metabolic and Bariatric Surgery Association of Nutrition and Dietetics European Association for the Study of Obesity The Obesity Society Obesity Action Coalition Obesity Canada
The obese patient.	The patient with obesity.	
The obese diabetic.	The patient with obesity and diabetes.	
The obese population.	People who have obesity.	





Key Takeaways



Ask the patient's permission to discuss their weight

Recognize and respect diverse patient preferences for weight terminology

Ask for, and use, patients' preferred words and phrases Default to neutral words (e.g., weight, high body weight)

Acknowledge that body weight is a sensitive topic for many patients

Use people-first language, and avoid language that might unintentionally communicate bias, blame, or judgement



