

# Addressing Weight Stigma in Primary Care for Women

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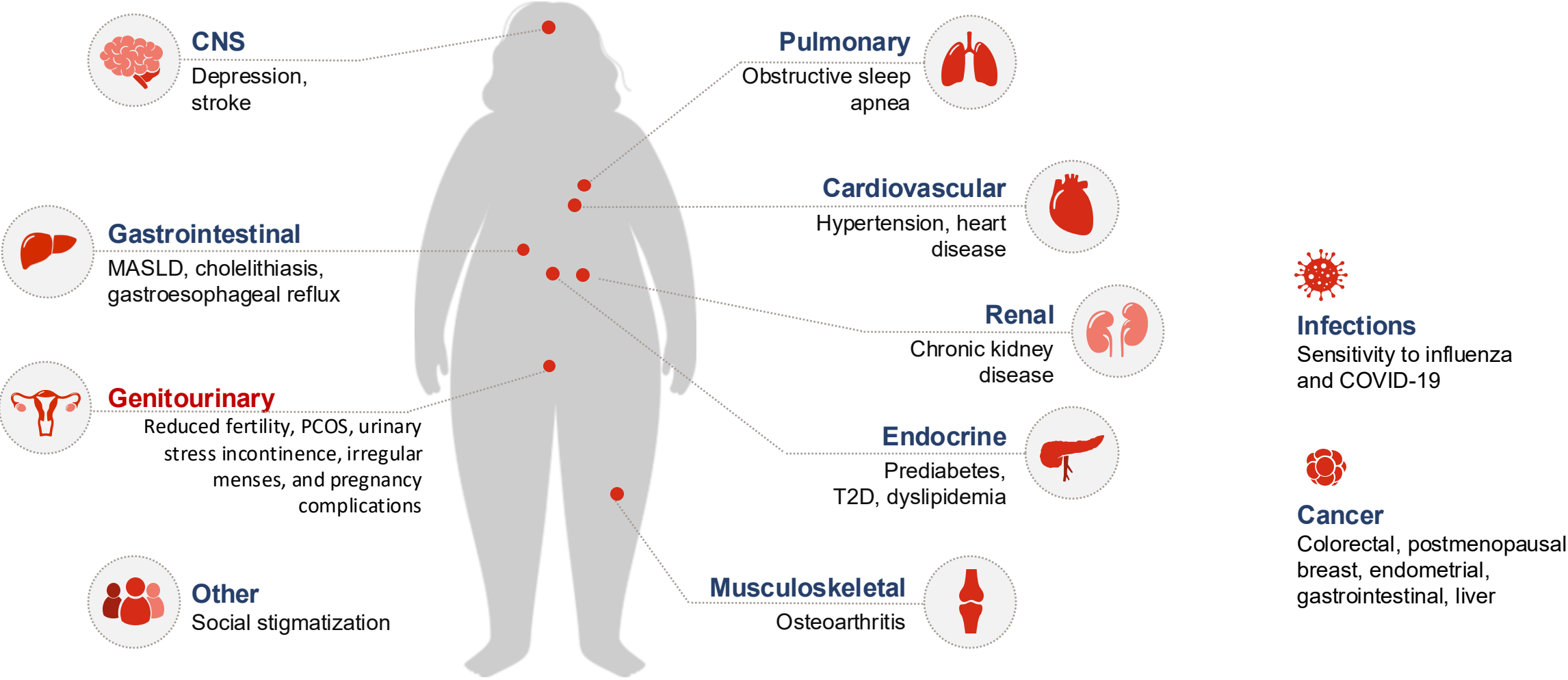


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# Obesity is a multisystem disease associated with complications<sup>1,2</sup>



CAD=Coronary Artery Disease; CKD=Chronic Kidney Disease; HF=Heart Failure; NAFLD=Nonalcoholic Fatty Liver Disease; NASH=Nonalcoholic Steatohepatitis; OHS=Obesity Hypoventilation Syndrome; OSA=Obstructive Sleep Apnea; PAD=Peripheral Artery Disease; PCOS=Polycystic Ovarian Syndrome; T2D=Type 2 Diabetes.  
1. Tsai AG, Bessesen DH. *Ann Intern Med.* 2019;170(5):ITC33-ITC48. 2. Sarma S, et al. *Diabetes Obes Metab.* 2021;23(Suppl. 1):3-16.



# Women are particularly vulnerable to weight stigma

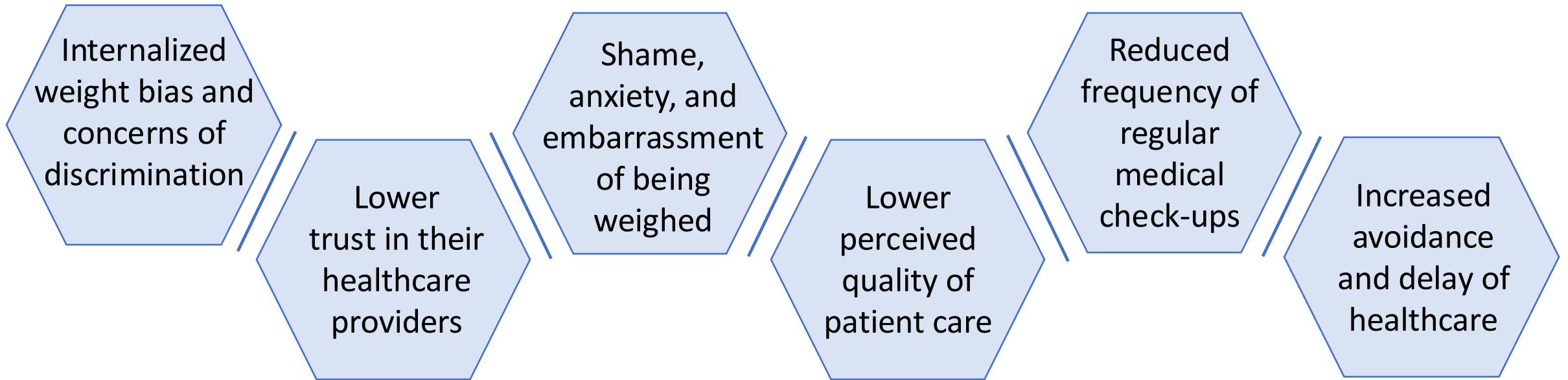
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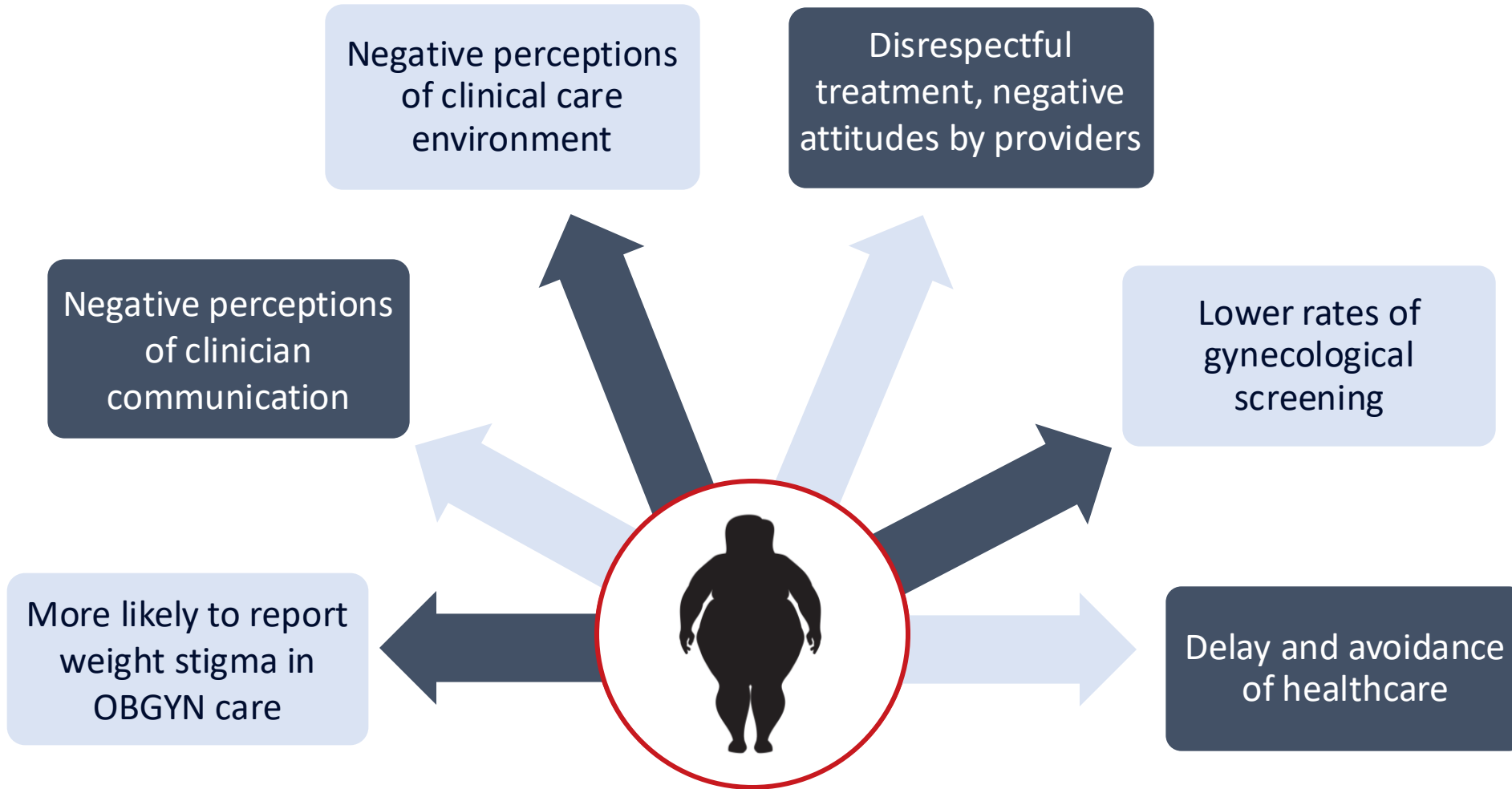
- Susceptible to harsher societal pressures and judgement based on body size
- Increased rates of weight stigma and discrimination
- Higher internalization of weight bias

# Weight stigma impairs women's healthcare

*Women with obesity are more likely to report stigma-related barriers and negative healthcare experiences than women at lower weight categories, including:*



# Weight stigma in gynecological care



# Women's views of priorities for stigma reduction

Healthcare Approaches for Reducing Weight Stigma	% of women who rated the approach as "highly important"
1. Healthcare professionals should be educated about weight stigma and its harmful impact on people who have obesity	94%
2. Healthcare professionals should receive training to provide more respectful, compassionate care to patients with obesity	94%
3. Obesity treatment programs should avoid approaches that stigmatize or blame people affected by obesity	90%
4. Weight loss programs should include services that help people cope with weight stigma in their lives	91%

# Strategies to eliminate weight stigma in women's healthcare

## Best practices:

- ✓ Recognize that women may have experienced weight stigma in prior healthcare experiences
- ✓ Engage in reflective, active listening with patients
- ✓ Avoid blaming or placing full responsibility on a woman for managing her weight
- ✓ Focus on health, rather than body weight
- ✓ Use patient-centered language and women's preferred terms for describing body weight

# Strategies to eliminate weight stigma in women's healthcare

## Best Practices (continued):

- ✓ Consider whether weighing the patient is medically necessary at each visit
- ✓ Ensure weighing procedures are conducted in a sensitive and respectful way
- ✓ Create a welcoming, inclusive environment in the waiting area & exam room
- ✓ Respect a patient's decision about her body weight regardless of whether or not weight loss is an intended goal
- ✓ Collaborate with the patient to identify realistic and sustainable health behavior goals
- ✓ Consider weight-inclusive approaches that prioritize health behaviors and outcomes rather than BMI or weight loss

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## STRATEGIES TO REDUCE WEIGHT STIGMA IN WOMEN'S HEALTHCARE

Women typically have higher rates of obesity compared to men. Although obesity can negatively affect health in both women and men, it has some impacts that are specific to women. These include an increased risk of polycystic ovary syndrome, endometrial cancer, and pregnancy complications. Furthermore, as compared to men, women have a higher risk of certain obesity-related complications, such as urinary incontinence and breast cancer. Additionally, women are disproportionately affected by weight discrimination and more likely to engage in self-stigma and self-blame for their weight than men. This higher prevalence of obesity and weight stigma in women increase their vulnerability to poor health and reduced quality of healthcare.

It's important for healthcare professionals to understand these unique risk factors for women and take steps to reduce weight stigma in patient care. Women with obesity are more likely to report negative healthcare experiences than women with lower weight. Perceived weight stigma in medical settings can have concerning implications for women's utilization of healthcare. Stigma-related barriers that compromise women's healthcare experiences can be prevented with patient-centered care, respectful communication, and collaboration.



Relevant Published Research Citations  
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**The damaging impact of weight stigma**  
 Professor Puhl discusses the psychological and physiological consequences of weight stigma.

[Listen to Podcast](#) 05:22 mins



**A patient's perspective of weight bias: Insights from Patty Nece**  
 Patty describes what it is like to be a patient experiencing weight stigma in the healthcare setting.

[View Video](#) 14:18 mins



**How weight bias hinders healthcare: Observations from Dr. Jaime Almandoz, M.D.**  
 A discussion with Dr. Jaime Almandoz, M.D., Associate Professor, Department of Internal Medicine, & Division of Endocrinology, UT Southwestern Medical Center.

[View Video](#) 11:51 mins

## MOTIVATIONAL INTERVIEWING

Health care professionals can use motivational interviewing to support patients of all body sizes in making health behavior changes. Through a goal-oriented, patient-centered, and interactive listening style, motivational interviewing aims to understand the patient's perspective, reduce patient ambivalence about change, promote patient motivation and confidence in achieving goals, and assist the patient to identify their own solutions.

- Examples of health behaviors that can be changed include:
- Dietary patterns (e.g., fat, sugar, sodium)
  - Fluid intake (e.g., water)
  - Physical activity (e.g., walking, cycling)

**Assessing Readiness**  
 Before you raise the topic, establish rapport and trust. After obtaining detailed information about the patient's health behavior change goals, ask the following types of questions to assess their readiness for making a change.

- Readiness for making a change**
- How is your current health behavior affecting you?
  - How would you like your health to be?
  - How do you feel about your current health behavior?
  - How ready are you to make a change?
  - On a scale from 1 (not ready) to 10 (ready), how ready are you to make a change, how ready are you to make a change?

- What Words To Use**  
 Research indicates that certain words related to weight and obesity can 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.
- Words to Avoid**
- ✗ Fat
  - ✗ Obese
  - ✗ Morbid
- Preferences vary across individuals.

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## 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.

## ACTIVE AND REFLECTIVE LISTENING TECHNIQUES

Effective listening is key to successful communication with patients. By engaging in active and reflective listening techniques with your patients, you can demonstrate your support and understanding of the patient, build trust, promote positive patient engagement, and foster motivation to change.

**What is active listening and why is it important?**  
 Active listening involves being fully engaged and attentive to the patient, receiving and interpreting their words, body language, tone of voice, and facial expressions to understand the fullest meaning of their message. When we engage in active listening, we can improve our interpersonal relationships.

- Benefits of active listening for patient-provider interactions:**
- ✔ Promotes trust and respect
  - ✔ Eases patient fear and anxiety
  - ✔ Helps to reduce misunderstandings and resolve conflicts
  - ✔ Improves interpersonal relationships
  - ✔ Enables better care

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