

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.



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Consider the following strategies to help reduce stigmatizing experiences for women in your practice setting:

Be cognizant that women may have experienced weight stigma in prior healthcare experiences.
Engage in reflective, active listening.
Avoid blaming or placing full responsibility on a woman for managing her weight.
Focus on health, rather than body weight. Instead of emphasizing weight loss, focus on the value of “non-scale victories”, such as improved mobility, quality of life, cardiometabolic risk factors, or other benefits of health behavior change.
Use patient-centered language and ask women what words or terms they prefer to describe their body weight. Use their preferred terminology when approaching conversations about weight.
Consider whether weighing the patient is medically necessary at each visit.
Ensure that procedures for weighing patients are conducted in a sensitive and respectful manner.
Create a welcoming and inclusive environment from the waiting room to the exam room. Ensure that clinic furniture, medical equipment, gowns and other supplies are appropriate for patients of all sizes.
Respect a patient’s decision about her body weight regardless of whether weight reduction 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.
Consider weight-inclusive treatment approaches that prioritize health behaviors, health outcomes, and quality of life, rather than BMI or body weight.

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