Weight Bias in the News Media and Public Health Campaigns: Are we Fighting Obesity or Obese Persons?

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Objectives

• Overview of the nature and extent of weight bias

• Consequences of weight bias for psychological and physical health

• Weight bias in news media & public health efforts
What is Weight Bias?

- Negative attitudes toward obese persons

- Stereotypes leading to:
  - stigma
  - rejection
  - prejudice
  - discrimination

- Verbal, physical, relational, cyber

- Subtle and overt
Why weight bias is a priority:

- Millions affected by stigma and prejudice
- Serious psychological consequences
- Pervasive social/economic inequalities
- Adverse effects on physical health
- Reduces quality of life
- Hinders policy efforts to address obesity
The Science on Weight Bias

Substantial Evidence of Bias in:

- The Media
- Employment
- Education
- Health care
- Interpersonal Relationships
- Youth

Puhl & Brownell (2001); Puhl & Heuer (2009)
Rates of Reported Discrimination Among Adults Ages 25-74 (N = 2290)

Error bars indicate 95% confidence intervals

[Graph showing rates of reported discrimination by various factors such as gender, race, age, weight, appearance, ethnicity/nationality, religion, sexual orientation, and physical disability.]

Puhl, Andreyeva, Brownell (2008)
Trends in rates of reported discrimination among adults ages 25-74 (N = 2962)

Error bars indicate 95% confidence intervals

Andreyeva, Puhl, Brownell (2008)
Fat is the new ugly on the playground

By Katia Hetter, Special to CNN
updated 12:25 PM EDT, Fri March 16, 2012
"For fat students, the school experience is one of ongoing prejudice, unnoticed discrimination, and almost constant harassment."

"From nursery school through college, fat students experience ostracism, discouragement, and sometimes violence."

National Education Association (1994)
Figure 5. Percentage of Staff Who Reported that Bullying Behaviors Were a Moderate/Major Problem

Percentage

<table>
<thead>
<tr>
<th>Nature of the Bullying</th>
<th>ESPs</th>
<th>Teachers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Orientation</td>
<td>13</td>
<td>19</td>
</tr>
<tr>
<td>Disability</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td>Weight</td>
<td>21</td>
<td>24</td>
</tr>
<tr>
<td>Sexist Remarks</td>
<td>17</td>
<td>21</td>
</tr>
<tr>
<td>Racial Remarks</td>
<td>13</td>
<td>19</td>
</tr>
<tr>
<td>Religious Remarks</td>
<td>6</td>
<td>6</td>
</tr>
</tbody>
</table>

National Education Association, 2011
Parental Perceptions of Why Youth are Bullied

N = 918 (National sample of parents)

Puhl, Luedicke, DePierre (under review)
# Teasing and Bullying in Adolescence

Adolescent reports of why peers are teased/bullied, and observed frequency (N = 1555)

<table>
<thead>
<tr>
<th>Reason for teasing</th>
<th>Primary reason students are teased</th>
<th>Observed sometimes, often, very often</th>
</tr>
</thead>
<tbody>
<tr>
<td>Being overweight</td>
<td>40.8%</td>
<td>78.5%</td>
</tr>
<tr>
<td>Gay/lesbian</td>
<td>37.8%</td>
<td>78.5%</td>
</tr>
<tr>
<td>Ability at school</td>
<td>9.6%</td>
<td>61.2%</td>
</tr>
<tr>
<td>Race/ethnicity</td>
<td>6.5%</td>
<td>45.8%</td>
</tr>
<tr>
<td>Physical disability</td>
<td>3.3%</td>
<td>35.8%</td>
</tr>
<tr>
<td>Religion</td>
<td>1.2%</td>
<td>20.8%</td>
</tr>
<tr>
<td>Low income/status</td>
<td>0.8%</td>
<td>24.9%</td>
</tr>
</tbody>
</table>

Types of Weight-Based Victimization Observed Toward Overweight and Obese Adolescents (N = 1555)

<table>
<thead>
<tr>
<th>Types of weight-based victimization</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>made fun of</td>
<td>92</td>
</tr>
<tr>
<td>called names</td>
<td>91</td>
</tr>
<tr>
<td>teased in a mean way</td>
<td>88</td>
</tr>
<tr>
<td>teased during physical activity</td>
<td>85</td>
</tr>
<tr>
<td>ignored or avoided</td>
<td>76</td>
</tr>
<tr>
<td>teased in the cafeteria</td>
<td>71</td>
</tr>
<tr>
<td>excluded from activities</td>
<td>67</td>
</tr>
<tr>
<td>target of negative rumors</td>
<td>68</td>
</tr>
<tr>
<td>verbally threatened</td>
<td>57</td>
</tr>
<tr>
<td>physically harassed</td>
<td>54</td>
</tr>
</tbody>
</table>

Weight Bias is Socially Acceptable
Weight Bias in the Media

Stereotypical portrayals

Abundant but often ignored

Reinforces social acceptability of bias

Affects public perceptions about obesity
“Fattertainment”
The “Fat Suit” Era
Impact of Media Exposure

*Weight bias increases with exposure to:*

- Television
- Films
- Fashion magazines
- Video games

Harrison, 2000; Latner et al., 2007; Lin & Reid, 2009
Postcards / Greeting Cards
Finally, an understandable food pyramid...
Too fat to run? Critics claim Chris Christie is too obese to become president...

How to Turn Chris Christie's Weight into an 'Issue'

American Way: Chris Christie, the fat guy who won't get the girl in 2012

Is Chris Christie Too Fat To Squeeze Into The Oval Office?
New Jersey Gov. Chris Christie made a huge impression at Israel's Western Wall yesterday during his first official overseas trip as head of the Garden State.

Christie, wearing a yarmulke with his name and title embroidered on it, brought his political heft to the holiest Jewish site in Jerusalem, where he laid his hands on the rough-hewn stone, his eyes shut in prayer.

Surrounded by a throng of rabbis and onlookers, Christie downplayed suggestions that the trip to Israel is intended to raise his political prospects back home.


"I am here because this is a place of enormous significance in the world."

Christie's brief visit to what has been called the Wailing Wall highlighted his growing popularity. Tourists stopped to shake his hand and pose for pictures. He even held a 6-month-old baby for one photo.

The rabbi of the holy site, who gave him a personal tour, was quick to point out that politicians who visit tend to win elections.

Christie — who declined to run for the White House this year, despite entreaties by Republican activists — endorsed fellow GOPer Mitt Romney for president last fall.

And the pugnacious Jersey governor is mentioned as a potential Romney running-mate, or a 2016 presidential candidate if President Obama is re-elected.
Decided to burn lots of calories today, so I set a fat kid on fire.

Like

134,453
like this

1,267
talking about this
24 HOURS

When they come
they'll eat
the fat ones first.

24 FITNESS
1-800-264-3460

Examiner / Darrell Bush
PLEASE
DO NOT FEED
THE
FAT
PEOPLE

NAFBR: National Association for Body Responsibility
www.NAFBR.org
News Media

Power to shape public perceptions of health issues

40-61% of adults access news online

“Seeing pictures and videos, rather than reading or hearing the facts, gives the best understanding of news events”

How are obese persons portrayed in news media?

Portrayals of obese persons in online news media

- Analyzed 371 news videos and 441 images
- Accompanying news reports about obesity
Visual Portrayals of Obese Persons in Online News Reports (N = 406)

<table>
<thead>
<tr>
<th>Negative characteristic</th>
<th>Overweight/obese (N = 287)</th>
<th>Non-overweight (N = 119)</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;Headless&quot;</td>
<td>59%</td>
<td>6%**</td>
</tr>
<tr>
<td>Shown from side or rear angle</td>
<td>40%</td>
<td>20%**</td>
</tr>
<tr>
<td>Only abdomen or lower body shown</td>
<td>52%</td>
<td>0%**</td>
</tr>
<tr>
<td>Shown without clothes or bare midriff</td>
<td>12%</td>
<td>4%*</td>
</tr>
<tr>
<td>Inappropriate fitting clothing</td>
<td>6%</td>
<td>0%**</td>
</tr>
<tr>
<td>Shown eating and/or drinking</td>
<td>8%</td>
<td>3%</td>
</tr>
<tr>
<td>Engaged in sedentary activity</td>
<td>5%</td>
<td>3%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Positive Characteristic</th>
<th>Overweight/obese (N = 287)</th>
<th>Non-overweight (N = 119)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wearing professional clothing</td>
<td>11%</td>
<td>50%**</td>
</tr>
<tr>
<td>Shown exercising</td>
<td>6%</td>
<td>20%**</td>
</tr>
<tr>
<td>Portrayed as expert or advocate</td>
<td>1%</td>
<td>33%**</td>
</tr>
<tr>
<td>Portrayed as health care provider</td>
<td>4%</td>
<td>22%**</td>
</tr>
</tbody>
</table>

* p < .05           **p < .001

Heuer, McClure, Puhl (2011) *J Health Communication*
# Visual Portrayals of Youth in Online News Videos

Puhl, Peterson, DePierre & Luedicke (in press)

<table>
<thead>
<tr>
<th>Video Portrayals</th>
<th>Overweight/Obese Youth</th>
<th>Non-Overweight Youth</th>
<th>z</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Negative characteristics</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>headless</td>
<td>46%</td>
<td>10%</td>
<td>6.55</td>
<td>0.00</td>
</tr>
<tr>
<td>unflattering portrayal from the rear view</td>
<td>37%</td>
<td>15%</td>
<td>4.29</td>
<td>0.00</td>
</tr>
<tr>
<td>eating and drinking</td>
<td>53%</td>
<td>53%</td>
<td>0.12</td>
<td>0.96</td>
</tr>
<tr>
<td>eating unhealthy food</td>
<td>42%</td>
<td>35%</td>
<td>1.09</td>
<td>0.28</td>
</tr>
<tr>
<td>unflattering emphasis on isolated body parts</td>
<td>28%</td>
<td>17%</td>
<td>2.24</td>
<td>0.03</td>
</tr>
<tr>
<td>engaging in sedentary behavior</td>
<td>28%</td>
<td>17%</td>
<td>2.09</td>
<td>0.04</td>
</tr>
<tr>
<td>showing bare abdomen</td>
<td>11%</td>
<td>4%</td>
<td>2.12</td>
<td>0.03</td>
</tr>
<tr>
<td>dressed in inappropriately fitting clothing</td>
<td>9%</td>
<td>0%</td>
<td>3.58</td>
<td>0.03</td>
</tr>
<tr>
<td><strong>Positive (non-stereotypical) characteristics</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>eating healthy food</td>
<td>22%</td>
<td>34%</td>
<td>-2.26</td>
<td>0.02</td>
</tr>
<tr>
<td>engaging in exercise</td>
<td>56%</td>
<td>42%</td>
<td>2.34</td>
<td>0.02</td>
</tr>
</tbody>
</table>

Puhl, Peterson, DePierre & Luedicke (in press)
Almost 10 Percent of U.S. Medical Costs Tied to Obesity

By Shaun Reinberg
HealthDay Reporter
July 28

MONDAY, July 27 (HealthDay News) -- Obesity in the United States now carries the hefty price tag of $147 billion per year in direct medical costs, just over 9 percent of all medical spending, experts report.

In fact, people who are obese spend almost $1,500 more each year on health care -- about 41 percent more than an average-weight person. Beyond those costs are the disability and early deaths caused by obesity, Dr. Thomas R. Frieden, director of
Findings

- 72% of images stigmatized obese persons
- 65% of videos stigmatized obese adults
- 77% of videos stigmatized obese youth

Experimental studies

- Stigmatizing images worsen public attitudes
- Non-stigmatizing images improve attitudes
- Public prefers non-stigmatizing images

Pearl, Puhl, Brownell, (2012) *Health Psychology*
Consequences of Weight Bias

- Social
- Psychological
- Medical
Social/Economic Consequences

- Social rejection
- Lower peer acceptance
- Worse relationship quality
- Poorer academic performance
- Avoidance of school
- Inequitable hiring practices
- Lower wages
- Prejudice from employers

Krukowski et al., 2009; Puhl et al., 2011; Rudolph et al., 2009
Academic Consequences

Because of weight-based teasing:

- Students report their grades are harmed
- Students report avoiding school

- The odds of these reports increased by 5% per teasing incident

(Even after controlling for gender, age, race, grades, and weight status)

Weight Bias

Vulnerability for

Depression  Anxiety  Low Self-Esteem  Poor Body Image  Suicidality

(see review by Puhl & Heuer, 2009, *Obesity*)
Health Consequences

Maladaptive eating behaviors:

- Binge eating
- Unhealthy weight control practices
- Coping with stigma by eating more food

Coping with weight stigma...

Study: Survey of 2449 women

*How do they cope with stigma experiences?*

79% reported eating; turning to food as coping mechanism

* Stigma is a stressor *
- Both acute and chronic form of stress
- Eating is common coping strategy in response to stress

Puhl & Brownell, 2006
Health Consequences

Impairs weight loss efforts:

- Higher calorie intake
- Higher program attrition
- Less weight loss

Schvey, Puhl, & Brownell, 2011; Carels et al, 2009; Wott & Carels, 2010
...more health consequences

- Avoidance of physical activity

- Cardiovascular health
  - elevated blood pressure
  - increased physiological stress

Seacat & Mickelson 2009; Vartanian & Shaprow, 2008; Bauer et al., 2004; Faith et al, 2002; Matthews et al., 2005; Schwimmer et al., 2003, Storch et al., 2006; Schmaltz, 2010
Weight Stigma Increases Cortisol Reactivity

N = 128 women. F(1, 94) = 6.436, p = .013, η² = .06
Covariates in the model are evaluated at the following values: Minutes since waking = 384.56, Days since last menstrual cycle = 16.21, Age = 26.63, BMI = 26.47, Stress = 20.05, Depression = 7.12

Schvey, Puhl, Brownell (under review)
Avoidance of Health Care

Study of 498 women:

Obese women delayed preventive services despite high access

Women attributed their decisions to:

- Disrespect from providers
- Embarrassment of being weighed
- Negative provider attitudes
- Medical equipment too small
- Unsolicited advice to lose weight

Amy et al., 2006, IJO
If your doctor referred to your weight in a way that makes you feel stigmatized, how would you react?

- I would feel bad about myself: 42%
- I would be upset/embarrassed: 41%
- I would talk to my doctor about it: 24%
- I would seek a new doctor: 21%
- I would avoid future doctor appointments: 19%

Possible Medical Impact

Bias, Stigma, Discrimination

- Diminished Income, Education
- Reduced Use of Health Care
- Compromised Health Care
- Diminished Self-Esteem, Perceived Inadequacy
- Negative Impact on Physiology

Impaired ability to lose weight
- Psychological Disorders
- Elevated Risk Factors
- Unhealthy behaviors
- Diminished Social Support

Morbidity and Mortality
Weight Bias as a Public Health Issue

Weight bias absent in public health discourse

Stigma undermines public health efforts

Stigma affects policy decisions about prevention and treatment

Obesity-Related Public Health Campaigns

Numerous campaigns across the country

Developed from positive intentions to improve health

Some have been embraced, others have been criticized

Promoting stigma/shame or supporting behavior change?

Little assessment and testing
Misguided Public Health Efforts

Georgia Children’s Health Alliance
Campaign to stop childhood obesity
Fat-Focused Billboards Warn Albany that Cheese Makes You Chubby

Your Abs on Cheese
PCRM.org

Your Thighs on Cheese
PCRM.org
PORTIONS HAVE GROWN
SO HAS TYPE 2 DIABETES, WHICH
CAN LEAD TO AMPUTATIONS

CUT YOUR PORTIONS. CUT YOUR RISK.
›› Call 311 for your Healthy Eating Packet

Made possible by funding from the Department of Health and Human Services.
©2012 New York City Department of Health and Mental Hygiene.
PETA Billboard Campaigns

Save the Whales
Lose the blubber: Go vegetarian.

Don’t pay for 2 seats.
Go vegetarian.
PETA PETA.org
“Habit Heroes” Exhibit on childhood obesity
Disney shuts down, retools obesity exhibit after critics complain

March 1, 2012 1:39 PM

By CBS News Staff

(CBS/AP) Walt Disney World calls itself the "happiest place on earth." But its latest Epcot exhibit, Habit Heroes, could have made obese children unhappy, critics say. After receiving complaints about the exhibit shortly after its unofficial opening in February, the park closed it down and is retooling the attraction.

PICTURES: Busted! 11 photos obesity docs don't want you to see

Habit Heroes featured animated fitness superheroes "Will Power" and "Callie Stenics" and super-sized villains "Snacker" and "Lead Bottom", who eat junk food and watch too much television. Critics said these characters are insensitive and reinforce stereotypes that obese children are lazy and have poor eating habits.

Obesity can sometimes be attributed to genetics and certain medications, and food can be used as a coping mechanism, doctors say.

"We’re appalled to learn that Disney, a traditional hallmark of childhood happiness and joy, has fallen under the shadow of negativity and discrimination," the National Association to Advance Fat Acceptance said in a statement.
Public Reactions to Anti-Obesity Campaigns

Examined 266 messages, 76 national, international, or visible campaigns

Randomly selected 30 campaigns (covering distinct themes):

- Sugar-sweetened beverages
- Portion sizes
- Fruit / vegetable consumption
- Physical activity
- Parent-targeted messages
- Stigmatizing content

Puhl, Peterson, Luedicke, 2012 *Int J Obesity*
Public Reactions to Anti-Obesity Campaigns

Nationally representative sample of 1001 Americans

Randomly assigned participants to view 10 (of 30) messages

Assessed public perceptions of messages:

- effective
- informative
- motivating
- accurate
- important
- confusing
- stigmatizing
- inappropriate
- vague
- pointless

* Do participants intend to act upon the message?

Puhl, Peterson, Luedicke, 2012 *Int J Obesity*
Negative Ratings:

Most negative
Most stigmatizing
Least motivating
Lowest intentions to comply

Childhood Obesity is Childhood Abuse

Too Much Screen Time. Too Much Kid.
Positive Ratings:

Most favorable
Most motivating
Least stigmatizing
Highest intentions to comply
Public Reactions to Obesity Campaigns

Public Reactions:

1) Stigmatizing campaign messages – rated worst, most stigmatizing, & lowest intent to comply with message content

2) Messages that focus on behavioral changes (e.g., increased F/V consumption, decreased soda) had best ratings, rated most motivating, and highest intentions of compliance

3) Messages perceived as most motivating made no mention of obesity at all

Puhl, Peterson, Luedicke, 2012 Int J Obesity
Study Replication/Extension

National sample of 1045 Americans

Assessed additional campaigns:

Puhl, Peterson, Luedicke (in press) American Journal Preventive Medicine
Study Replication/Extension

Pretested campaigns for ratings of stigmatization

Randomly assigned participants to view 10 (of 20) obesity-related health campaigns

Assessed perceptions of whether each campaign was:
- stigmatizing of obese persons
- motivating for improving lifestyle changes
- promoting self-efficacy for behavior change
- viewed to have appropriate visual content

Findings

Stigmatizing campaigns:

1) no more likely to instill motivation for improving lifestyle behaviors than neutral campaigns

2) rated to induce less self-efficacy for behavior change

3) rated as having less appropriate visual content

* Findings remained consistent regardless of participants’ body weight and across socio-demographic predictors

Challenges

- Campaigns/products want to grab attention

- Gravitate towards “shock value”, controversy

- How can we generate public attention without shaming/stigmatizing obese persons?

- How do we find a balance between shocking ads intended to motivate change and those that reinforce stigma?
What NOT to do:

- Headless images
- Pejorative language
- Blame the individual
- Communicate weight-based stereotypes
- Fat jokes/humor
- Suggest that person’s body weight implies negative assumptions about their character, intelligence, abilities, etc.

What TO do:

- Respectful portrayals
- Full person shown
- Promote health behaviors
- Suggest specific actions
- Appropriate language
- Portrayed in appropriate-fitting clothing and well-kept appearance
- Consider if “obesity” needs to be mentioned?
Insight: America's hatred of fat hurts obesity fight

Prejudice is impeding anti-obesity efforts, experts say

Some anti-obesity campaigns may backfire, researchers say

Obesity Campaigns: The Fine Line Between Educating and Shaming
Yale Rudd Center Media Gallery

A public resource for non-stigmatizing portrayals of obese people

- Media
- Research
- Education
- Health care
LONDON | Thu Jul 29, 2010

(Reuters) - British Public Health Minister has urged doctors to call overweight patients 'fat' rather than ‘obese.’

“Doctors and health workers are too worried about using the term ‘fat’”, said the health minister, “but doing so will motivate people to take personal responsibility for their lifestyles.”

“Calling them ‘obese’ does not provide sufficient motivation. Just call them fat: Plain-speaking doctors will jolt people into losing weight.”
National Studies: Preferences for Weight Terminology

“Imagine you are visiting your doctor for a routine check-up. The nurse has measured you and found that you are at least 50 pounds over your recommended weight. Your doctor will be in shortly to speak with you. You have a good relationship with your doctor, who is committed to your health and well-being. Doctors can use different terms to describe body weight. Please indicate how desirable or undesirable you would find each of the following terms if your doctor used it in referring to your weight.”

morbidly obese, obese, overweight, heavy, fat, high BMI, chubby, weight problem, unhealthy weight, weight
Adults (N = 1064) and Parents (N = 445)
Perceptions of language used by doctors

**Least Stigmatizing/Blaming**
- weight
- unhealthy weight
- high BMI

**Most Stigmatizing/Blaming**
- fat
- morbidly obese

**Most Motivating**
- unhealthy weight
- overweight

**Least Motivating**
- fat
- morbidly obese
- chubby

<table>
<thead>
<tr>
<th>Reaction</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feel upset/embarrassed</td>
<td>42%</td>
</tr>
<tr>
<td>Seek a new doctor</td>
<td>35%</td>
</tr>
<tr>
<td>Avoid future medical appointments</td>
<td>24%</td>
</tr>
</tbody>
</table>

Findings were consistent across the population

Directly challenges recommendations from Public Health Minister

*The language we use about weight is important in our efforts to address obesity
In Public Health Efforts to Address Obesity...

Include weight bias on the agenda:

- Increase attention to weight bias and its consequences
- Use respectful language, messaging, images
- Avoid approaches that shame and blame
- Focus on specific health behaviors
- Remove stigma from existing efforts
- Fight obesity, not obese persons
Thank you

*Rudd Center for Food Policy & Obesity*

www.YaleRuddCenter.org
Talking to patients about weight

- Use neutral terms such as *weight* and *BMI*

- Avoid language that places blame on patients

Consider this language in discussions about weight:

“*Could we talk about your weight today?*”

“*How do you feel about your weight?*”

“*What words would you like me to use when we talk about your weight?*”
Support Efforts to Address Weight Bias in Schools

- Educate about complex causes of obesity
- Emphasize importance of health, rather than weight
- Treat weight bullying on par with bullying due to race, religion, gender, sexual orientation
- Help students challenge their stereotypes about weight
- Encourage awareness of how media promotes bias
- Encourage teacher intervention in teasing situations
- Implement zero-tolerance bullying policies