BODY is welcome!



Weight Stigma: How is it Harmful??

A Resource For Educators

We are all here to help children and youth thrive in all areas of life. However, what was once thought of as being helpful food/nutrition advice, is now known to be potentially harmful and oppressive. There is a lot to (un)learn about approaching food with children and youth. Feeling resistance to this process is completely normal. Please approach this resource with an open mind and consider your own privileges and biases. Unlearning diet culture takes practice, patience and self-compassion.

Weight bias and stigma exists everywhere you go—in the workplace, schools, child care and health care settings. Weight stigma is an incredibly important social justice issue and we are all responsible to help make changes for the better. Beauty 'ideals' change constantly, and society's beliefs of who or what is 'healthy' create harm for all people, regardless of shape or size. However, our bodies are not the problem; the messages we receive about them is.

What is weight bias?

Weight bias refers to negative attitudes, beliefs, assumptions, and judgments and affects people who live in larger bodies more than others (Puhl & King, 2013). These attitudes can often lead to negative stereotypes, which cause people to wrongly assume that people who live in larger bodies have a number of negative qualities. Examples include the false belief that larger people are physically unattractive, incompetent, lazy, unmotivated, lacking self-discipline and sloppy.

Weight bias itself can cause harm to health. Examples of these harms include poor body image, low self-esteem, low self-confidence, loneliness, depression, anxiety, disordered eating (e.g., binge/restrictive eating or secretive eating), lowered metabolism, stress and avoidance of physical activity.

What is weight stigma?

Weight-based stigmatization is the most common cause of bullying in schools (Puhl & King, 2013). Weight stigma is the devaluation of individuals based on their body and/or size. It can make people feel like a less important or less valuable member of society. Self-stigma occurs when someone internalizes negative stereotypes and weight bias, and as a result, sees themselves as less worthy based on their weight (Pearl & Puhl, 2018).

Consider how you can combat weight bias and stigma in your classroom and/or child care setting:

AVOID IMPOSING PERSONAL BELIEFS AND ASSUMPTIONS ABOUT WEIGHT AND THE LINK TO OVERALL HEALTH

People come in all shapes and sizes and can be healthy at any size. A person's body weight, shape or size doesn't tell us anything about their overall health or their health behaviours (i.e., eating well, being active, sleeping well, stress management etc.). In addition, "being healthy" is not a requirement to be worthy of love, respect and acceptance.

THINGS THAT ARE HARMFUL:

- Treating body weight as something you can control.
- Speaking about your own appearance or size in a negative way.
- Making appearance- or size-based comments about someone else.
- Shaming, blaming or criticizing children and youth to "motivate" them to be "healthy" (e.g., commenting on their lunch "that's too much sugar. Shouldn't you be eating more vegetables?" or "Good for you! You ate everything in your lunch today. You're going to grow big and strong.").
- Labeling children and youth as "small" or "beautiful" may contribute to pressure to remain that way or lowered self-esteem.
- Using media that reinforces harmful misconceptions about body size and health (e.g. Garfield the Cat's weight is an object of ridicule and is portrayed as lazy).

THINGS THAT ARE HELPFUL:

- Understanding that body weight is out of our control, where 70-80% of our weight is genetically determined (Wardle et al., 2008). Meanwhile, the number one factor that impacts our behaviours is the environment in which we live. We have very little influence on our food environment (e.g., convenience stores are often located by schools).
- Striving for non-appearance related comments. For example, let children and youth know how happy you are to spend time with them and how interested you are in their thoughts and ideas.

- Normalizing weight and body changes. Weight gain is normal and bodies change throughout life. It is normal to gain weight during pre-puberty and into puberty.
- Starting conversations about media literacy. Challenge children and youth to think critically about the images they see and what they'd like to see instead.

AVOID IMPOSING PERSONAL BELIEFS OR PRACTICES ON DIET OR HEALTH

What is "healthy eating" anyway? The truth is, it means different things to different people and is a very individual and personal concept –and that's okay! It's important to take a step back and get curious about our own beliefs on what "eating well" means to us. Is it possible that our own biases are showing up in the messages we share with children and youth?

THINGS THAT ARE HARMFUL:

- Imposing personal views about food or health (e.g., "You're not a baby cow, so you shouldn't be drinking milk" OR "Thin is healthy")
- Talking about using food or exercise to control weight, change body shape/size/appearance or to "prevent obesity", even if it's jokingly (e.g., "No ice cream for me. Need to get rid of this belly!" or "Yes please, I will have seconds, I earned it after my workout today.")

THINGS THAT ARE HELPFUL:

- Explaining different ways to enjoy and experience food.
 Acknowledge that there isn't a single definition for healthy eating and it can look different based on cultural, familial and individual experiences.
- Role modeling positive language about food by disassociating it from appearance or weight-based comments (e.g., "No thank you, I'm not in the mood for ice cream." or "Yes please I would like seconds, I'm still feeling hungry.")

AVOID (UN)INTENTIONALLY BODY SHAMING OTHERS

Body-shaming can lead to a vicious cycle of judgment and criticism and can range from subtle to obvious (Walden, 2013). This can look like criticizing your own appearance, through a judgment or comparison to another person. (e.g. "I'm so fat compared to her."); criticizing another's appearance in front of them (e.g. "With those thighs, you're never going to find a date."); and/or criticizing another's appearance without their knowledge (e.g. "Oh did you see what [insert name] was eating at lunch today? They shouldn't be eating so much.").

THINGS THAT ARE HARMFUL:

- Talking about body weight as something you can control. Similarly, believing that someone's health is determined by their body shape/size (i.e., believing that thinner people are healthier than fatter people or vice versa).
- Weighing children/youth or having them track food intake (e.g., calculating their Body Mass Index (BMI), counting serving sizes). Note: many health care professionals are unaware of the harms of using BMI and may take a weight-centric approach to care.
- Ignoring and/or engaging in weight-based bullying or teasing (e.g., the belief that "kids will be kids").
- Holding a staff competition centering around weight loss, dieting (e.g., Weight loss challenge, step counting, group dieting).
- Putting children and youth on a diet of any kind with the purpose of changing weight.

THINGS THAT ARE HELPFUL:

- Don't talk about someone's body weight (including your own)...ever.
- Confronting those who participate in body-shaming.
 Address weight-based teasing and help children and
 youth recognize the harm (e.g., "Hey, when you said this,
 it hurt me...").
- Helping children and youth explore why they are actually upset instead of using body shaming to express themselves.
- Anti-bullying policies including protection for people who are bullied about their weight.
- Creating a supportive community and a weight-inclusive environment by promoting body acceptance and appreciation.
- Celebrating individuals for who they are, not for their body weight or size.
- Reinforcing that people come in diverse body shapes and sizes.
- Using posters and books that feature people of all shapes and sizes doing a variety of activities. E.g., display diverse posters in hallways, classrooms, program rooms etc.

References:

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This resource does not aim to address food security but rather is intended to address nutrition and health beliefs.

Resource provided by the registered dietitians of the Manitoba Food Environments for Early Learning and Schools (MB FEELS) Committee.

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