

Registered Charity No: 1100648 Company No: 4796449



# Managing Weight: Understanding weight stigma and best practice for behavioural interventions

Convener, Dr Laura McGowan

Lecturer in Nutrition & Behaviour Change, Queen's University Belfast

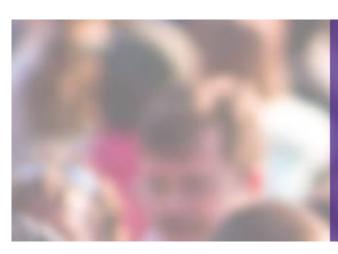
Lead - Association for Study of Obesity NI Network

Committee member - Division of Health Psychology NI









## Division of Health Psychology

The goal of health psychology is to study the psychological processes underlying health, illness and health care, and to apply these findings to the promotion and maintenance of health, the analysis and improvement of the health care system and health policy formation, the prevention of illness and disability, and the enhancement of outcomes for those who are ill or disabled.

## Who are ASO?



- ASO is the UK's foremost organisation dedicated to the understanding, prevention and treatment of obesity
- Founded in 1967, the first such organisation worldwide
- Affiliated to the European ASO (EASO) and The World Obesity Federation (WOF)
- Organised the 1st International Congress on Obesity in London in 1974 and the 2nd European Congress on Obesity in Oxford in 1989
- Founding body of the International Journal of Obesity
- Trustees elected from the membership and run for a term of three years

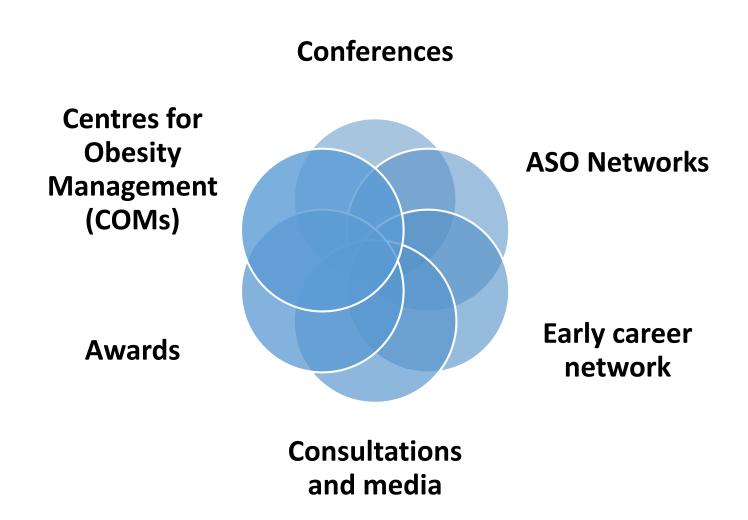


### **ASO** Mission

"The ASO aims to develop an understanding of obesity through the pursuit of excellence in research and education, the facilitation of contact between individuals and organisations, and the promotion of action to prevent and treat obesity"

## **ASO Activities**







### Association for the Study of Obesity Networks

Registered Charity No: 1100648, Company No: 4796449, www.aso.org.uk

#### **ASO Network aims:**

- Local links between academics, practitioners and policymakers
- Share good practice, research, policy updates
- Local networking opportunities
- Development of partnerships and collaborations

#### **Networks:**

- North East England
- East of England
- Yorkshire
- North West England
- Midlands
- London & South East
- Wales
- Northern Ireland
- Scotland
- South West England

# Centres for Obesity Management (COMs)



- A network of Adult COMs
  - strengthening and advancing the evidence base
  - improving practice
  - influencing policy for the management of obesity in adults within the UK
- ASO members working within Tier 2, Tier 3 and Tier 4 adult obesity services delivered across a range of NHS and non NHS settings
- So far, 34 approved COMs in the UK (e.g. NHS Trusts, local weight management services, Cancer Research UK, Health Boards etc)
- Application form available via ASO Office: <u>ASOoffice@aso.org.uk</u>

www.aso.org.uk/research-practice/centres-for-obesity-management/

# Membership and benefits of joining



- Full Membership –£60
- Student Membership –£30
- Reduced delegate fees at ASO conferences and training events including UKCO
- Free attendance at most ASO Network events
- Affiliation to the European Association for the Study of Obesity (EASO) and the World Obesity Federation (WOF)
- Reduced delegate fees at EASO and WOF congresses and events (e.g. ECO and ICO)
- Members area of the ASO website
- Eligibility for ASO awards
- Voting rights on the main policy or administrative issues of the ASO
- Discounted journal subscriptions (Diabetes, Obesity and Metabolism; International Journal of Obesity; International Journal of Paediatric Obesity; Obesity Reviews)

Last Chance for ECO 2019...





Theme: Future thinking and innovation in Obesity

### Deadlines:

- Poster/oral abstracts: Wednesday 12<sup>th</sup> June 2019
  - Abstract submission information on UKCO 2019 website
- Early bird registration: Friday 12th July 2019

UKCO Belfast 2021!

Back to the purpose of today...

# Managing Weight: Understanding weight stigma and best practice for behavioural interventions

# Health Survey for NI – 2017/18

'classified with obesity i.e. a BMI> 30kg/m2'

### 64% of adults were either overweight (37%) or obese (27%)



Females - Have a greater tendency to be normal including underweight than males

Normal including underweight 43%; Overweight 30%; Obese 27%

Males - Have a greater tendency to be Overweight than females Normal including underweight 27%; Overweight 46%; Obese 26%



40% of males and 47% of females had changed their eating habits in the past 3 years to lose weight

For those who tried to control their weight or eat more healthily, lack of willpower was the main obstacle encountered





Around a quarter (26%) of children aged 2-15 were either overweight (18%) or obese (9%)

Pregnant women in NI:
>1 in 5 (20.4%)
BMI>30kg/m<sup>2</sup>

(n=4868)

'booking' visit

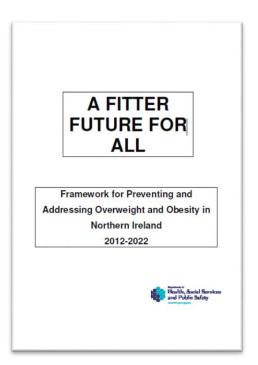
Increasing by 0.5-1% annually since 2011

Source: NIMATS, Child Health Report

### A Fitter Future for All - NI

- Regional framework for the prevention of obesity 2012-2022
- A cross-sectoral, integrated life-course framework which aims to:

'empower the population of Northern Ireland to make healthy choices, and reduce the level of harm related to overweight and obesity, by creating an environment that supports and promotes a physically active lifestyle and a healthy diet'.



#### **HSNI 2010**

23% with obesity36% overweight59% with overweight and obesity

#### HSNI 2016/17

27% with obesity
36% overweight
~62% with overweight and
obesity

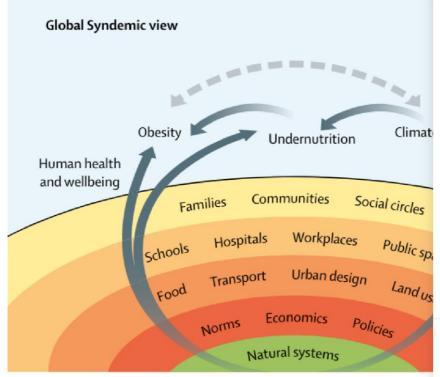
#### **HSNI 2017/18**

27% with obesity37% overweight64% with overweight and obesity

# Weight isn't just about personal choices...

The Global Syndemic of Obesity, Unde Climate Change: The Lancet Commiss

Published: January 27, 2019



EASO @EASOobesity · 1d

Yes, you can spot neighborhoods with high #obesity rates from outer space.

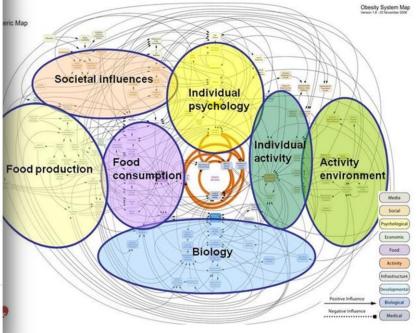
But it's not about the people, it's about the physical features of neighborhoods... paper in @JAMANetworkOpen

Great post w/ links to opinion and research here by @conscienhealth buff.ly/2ovsxAf





t Series]...looks at obesity in er context of common ocietal and political drivers"



# Weight Bias & Obesity Stigma

#### **Key inquiry findings**

88%

of people with obesity reported having been stigmatised, criticised or abused as a direct result of their obesity 94%

of all respondents believe that there is not enough understanding about the causes of obesity amongst the public, politicians and other stakeholders

26%

of people with obesity reported being treated with dignity and respect by healthcare professionals when seeking advice or treatment for their obesity **42%** 

of people with obesity did not feel comfortable talking to their GP about their obesity The Current Landscape of Obesity Services: A report from the All-Party Parliamentary Group on Obesity, 2018

>1/3
of respondents
with obesity
have not
accessed any
lifestyle or
prevention
services

# **Obesity Voices**



# How does weight stigma make obesity worse?

Healthcare professionals?

Media?

Society?

Friends/family? (Well-intentioned?)

Individual experiences obesity stigma (negative/unsupportive discussion/ imagery in media/ teasing/bullying etc.)...

- unhealthy eating behaviours e.g. binge eating
- increased caloric consumption
  - reluctance to diet

attenuating physical activity – fear/ shame etc.

**INCREASING BMI** 

- physiological stress responses?

Unintended impact of public health campaigns?

Focus and blame on individual-level?

Tomiyama, 2014 Appetite; Tomiyama et al. 2018 BMC Med; Phelan et al. 2015 Obes Revs

### Future?

Changing environments

Supporting healthy lifestyles and choices

A range of supportive and empowering
 \*evidence-based\*, \*non-stigmatising\*,
 \*patient-centred\* services and interventions to assist people managing their weight - tailored to a range of life stages

#### Tiers of obesity services

Obesity services within the United Kingdom are structured into Tiers, with each Tier providing a different intervention:

#### Tier 1:

Primary activity, population level public health prevention, identifying those at risk, referring into appropriate interventions

#### Tier 2: Community based weight management services

#### Tier 3:

Specialist weight management services for people with severe and complex obesity

Tier 4: Bariatric (weight loss) surgery





