



Mindframe: Quick reference guide for reducing weight stigma

This resource provides guidance on communicating about issues surrounding body weight, shape and size in ways that help reduce stigma and harm to individuals.

The connection between health, wellbeing and body weight is more complicated than the stereotype that a smaller body means healthy and larger body means unhealthy. Most of time, being a higher or lower weight does not indicate a mental health issue. But there are cases where changes in weight may be a symptom of mental illnesses. This can include eating disorders, anxiety or depression, and side-effects of treatment.

Responsible communication about bodies at all weights, shapes and sizes involves being

aware of complexities and bringing nuance to the discussion.

Stigmatising media portrayals of people of higher or lower weights can contribute to distress, prompt or worsen disordered eating behaviours or mental health concerns, and prevent help-seeking. By communicating respectfully, we can help to change the stigma that is commonly held in society and help to prevent distress, disordered eating and eating disorders, as well as body bullying and body-related discrimination.

For more detail and context, access the *Mindframe* guidelines suite and other supporting resources [here](#).



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An

EVERYMIND program

Key guidance to reduce weight stigma

- Use language that empowers and reflects people's lived and living experiences. When describing an individual, use the words they prefer. When referring to a group, use person-first language, such as "people with higher body weights" or "people living with anorexia nervosa", to prioritise the person before the condition.
- Avoid shame or blame, for example attributing weight solely to lifestyle factors such as diet or exercise and putting all responsibility onto the person. Acknowledge that body size, weight and shape are influenced by a wide range of factors, many of which are outside a person's control. This may include genetics, food security and other socioeconomic factors.
- Avoid attributing someone's weight to an eating disorder or other mental health concern unless verified by an authoritative source.
- Avoid stigmatising language and stereotypes, for example calling people "lazy", inferring they look unattractive or unwell, or phrasing with negative connotations such as "suffering". Opt for neutral language and descriptors instead.
- Avoid glamorising weight changes, or promoting weight loss methods or regimes.
- Promote help-seeking information or refer to organisations with expertise in body weight concerns or eating disorders such as [Butterfly Foundation](#) or [The Obesity Collective](#).
- Ensure those with lived and living experience being of a higher or lower body weight are safe and supported when sharing their story. Personal accounts can provide valuable insight, however it can be harmful for people to share particular details of their story. See the [Mindframe guidelines on reporting and portrayal of eating disorders](#) for detailed guidance on approaching personal stories safely.
- Strive for nuance, understanding, and balance when exploring issues related to weight. Take a holistic and strengths-based approach to wellbeing. There are many factors that contribute to health and wellbeing at individual, family, community and population levels (e.g. nutrition, sleep hygiene, stress management, movement, work-life balance). These approaches may be used by people at any size, shape or weight.



Limitations of BMI

Body Mass Index (BMI) is a calculation often used as part of a medicalised model to measure and categorise someone's weight and presumed health status and risk. However, there are a number of limitations to BMI. For example, BMI does not take into account age, sex, ethnicity or muscularity and is therefore limited as an indicator of physical health. Therefore, avoid using BMI to define a person's health and keep in mind the many other factors that influence health and wellbeing.

Guidance on using images when communicating about body weight, shape and size

Imagery can be particularly important when communicating about weight.

- Avoid stereotypical images (such as bulging bellies without heads, bare hip or rib bones) or images of stigmatised or disordered eating behaviours such as eating fast food, weighing food, laxatives, empty plates, scales or other measurement devices such as tape measures or apps.
- Instead, aim to include pictures that are neutral or solutions-focused (such as people of various weights doing everyday activities such as walking the dog, playing sport, cooking together or attending a community event).



Mindframe support

For advice on communicating about eating disorders, please refer to the [Mindframe Guidelines on reporting and portrayal of eating disorders](#) or, contact Mindframe:

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