



Promoting Health without harming through digital training tools

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5.4. Beyond body weight







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5.4. Beyond body weight

Fatness and health

There is a significant amount of evidence claiming that several diseases are associated with having a large body. However, it should be noted that many of those results are driven by epidemiologic studies. It is well-established that one of the most important limitations of epidemiologic research is that it cannot prove causation. In other words, it is crucial to take into consideration different factors that can affect the development of disease, apart from body weight (Bacon and Aphramor, 2014). According to Bacon and Aphramor, the two writers of the book "Body Respect", three of the most common confounders that can increase the risk of disease in people living in large bodies are the following:

1. Fitness

It is very common for people to make the assumption that a person who lives in a large body is unfit. That is why people in large bodies very often receive unsolicited advice (from health care professionals, family, friends, etc.) to exercise, in order to lose weight in the name of health. According to the results of a meta-analysis, unfit individuals are at a double risk of mortality independent of BMI, while at the same time the death rate of individuals with overweight and obesity that are fit is similar to individuals who are both fit and have a "normal" body weight (Barry et al., 2014). In other words, being moderately fit is more important for good health than having a low body mass index.

It should be noted that the key message here isn't to promote weight gain, but instead to understand how beneficial it can be for health to increase physical activity, regardless of body weight. It is important to start focusing on effective ways to encourage physical activity, rather than putting emphasis solely on weight-loss methods (Barry et al., 2014). This is especially important if we take into consideration that weight stigma experiences appear to demotivate people from engaging in exercise behaviours (Vartanian, 2008).

2. Weight Stigma & Discrimination

In our modern society that promotes thinness as an ideal, people who live in large bodies are exposed to stigmatising situations on a daily basis. Experiencing stigma and discrimination poses a serious threat to people's health by increasing stress, which is a key factor for chronic diseases, including cardiovascular disease and diabetes (Bacon and Aphramor L, 2014). A study by Tomiyama et al., (2014) showed that weight stigma



was associated with measures of cortisol and oxidative stress independent of abdominal adiposity. It is also suggested that weight stigma may deteriorate women's health, even when they have a weight that is nearer to what is considered "normal" according to BMI. In other words, it seems that the way a person perceives their weight status can affect their health more compared to their actual BMI.

In addition to physical health, weight stigma can also have social and emotional effects. An experiment by Major et al., (2014) showed that exposure to weight-stigmatising messages threatens the social identity of individuals who perceive themselves as being overweight. Moreover, those messages made all of the participants worry about being a target of stigma, even if they did not perceive themselves as being overweight.

A meta-analysis from Emmer et al., (2019), revealed a strong association between weight stigma and mental health: the more people perceived weight stigma, the worse their mental health status became. Stigma can result in a variety of adverse emotional responses such as depression, low self-esteem, and anxiety (World Obesity).

However, there is a tendency to neglect the harmful effects of weight stigma on health but rather, attribute them to the weight itself and accuse people in heavy bodies of "not trying enough". It is worth wondering why the majority of health-related interventions keep focusing only on weight loss and do not seem to take into consideration the detrimental impact of weight stigma on overall health and the importance of developing adaptive coping strategies (Emmer et al., 2019).

*You can read more about the impact of weight bias on health in chapter 1.4.

3. Dieting & Weight Cycling

The drive for thinness that is reinforced by the current social stereotypes can create the distortion that a person owes it to society to be thin (Montani et al., 2015). Thus, people often feel systemic pressure to go on a diet and never feel satisfied with how their body looks. Trying to make everyone look the same and be "one size" to fit the modern ideals of what is considered to be acceptable is itself a product of bias, which does not acknowledge that body diversity is a natural part of human experience. Such a dysfunctional approach can add to the burden that a person may already have to face throughout everyday life challenges.

As we have already discussed in the previous sob-module, weight-loss related to dieting is only temporary and can actually lead to weight (re)gain (sometimes even higher than the initial body weight) in the long run. The recurrence of weight regain that is observed after caloric restriction and deprivation that comes from dieting, stresses the cardiovascular system of an individual and can affect some of the most well-known cardiovascular risk factors, including blood pressure and insulin (Montani et al., 2015). Notably, weight cycling is strongly associated with overall mortality, as





well as mortality and morbidity related to coronary heart disease (Lissner et al., 1991; Blair et al., 1993; Strohacker et al., 2009; Bacon and Aphramor, 2011). Thus, it is of significant importance to realise that public health can be seriously damaged by the increased prevalence of diet-induced weight cycling, which is amplified by the social pressure for thinness (Montani et al., 2015).

Social Determinants of Health

As we have already discussed in sub-module 5.2., weight control is very complex, as it is affected by a great variety of different parameters that interact with each other. At the same time, focusing solely on weight cannot provide us with enough information to assess the health status of a person. Even BMI, which is the most popular tool being used to determine obesity, is proven to be insufficient and has serious limitations as a health measure. That being said, it is an overly simplistic approach to assume that eating behaviour and physical activity levels are the only factors that affect health and this assumption can often lead to discrimination.

It is well-documented that the social conditions in which people live, learn, work, play, and age, can have a significant impact on their health. Those conditions represent the so-called **social determinants of health** (Irwin et al., 2006).





Social Determinants of Health



Figure 5.4.1.: Social Determination of Health https://health.gov/healthypeople/objectives-and-data/social-determinants-health

According to the Office of Disease Prevention and Health Promotion (ODPHP) (Healthy People (2030), some examples of social determinants of health include:

- Safe housing, transportation, and neighbourhoods,
- racism, discrimination, and violence,
- education, job opportunities, and income,
- access to nutritious foods and physical activity opportunities,
- polluted air and water,
- language and literacy skills.

There is a large body of literature showing that poor social determinants of health can have damaging effects on peoples' well-being not only in the short-term but also in the long-term. On the other hand, favourable social conditions are associated with improved health outcomes (Taylor et al, 2016). In other words, health disparities and





inequities are largely attributed to social determinants of health and cannot be treated by just promoting healthy behaviors (Healthy People 2030).

However, the majority of medical and government health recommendations seem to acknowledge only the personal responsibility for health, while the real challenge is to create appropriate social determinants of health for each and every person without exception. Social change is the key solution to focus on if we really want to improve public health. It is worth mentioning that one of the most important goals of Healthy People 2030 refers to social determinants of health: "Create social, physical, and economic environments that promote attaining the full potential for health and wellbeing for all."





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