



Reshaping the Conversation on Health and Weight: Recommendations Based on the Expert Panel Convened by the National Eating Disorders Association and Strategies to Overcome and Prevent (STOP) Obesity Alliance

Introduction

The media is working to embrace more realistic images in the pages of magazines and to become more knowledgeable about what is - and what is not - healthy weight and healthy weight loss.

However, according to a panel of experts assembled earlier this year, there is more to do to ensure that the media delivers an accurate, realistic and consistent message about weight and weight loss. Change will not be easy, they said, but steps can be taken to reshape the conversation about weight, weight loss and body image.

This brief paper provides background on the panel and its effort to identify objectives aimed at improved communications on health and weight; and it outlines the resulting consensus-based recommendations.

The Expert Panel

The National Eating Disorders Association and the STOP Obesity Alliance convened a national expert panel on April 2, 2010 in New York City to discuss the role of the media in communicating positive and negative messages on weight and health.

Moderated by Diana Williams of New York's WABC-TV, the panel included eating disorder and obesity experts as well as top-tier journalists: Dr. Ovidio Bermudez, Past President, NEDA; Kate Dailey, Health and Lifestyles Editor, Newsweek.com; Jen Drexler, Partner, Just Ask a Woman; Plus-sized model Emme; Dr. Max Gomez, Medical Reporter, WCBS-TV; Joe Nadglowski, Jr., President & CEO, Obesity Action Coalition; Wendy Naugle, Deputy Editor, Glamour Magazine; and, Dr. Donna Ryan, President, The Obesity Society.

The panel identified the media as a key source of public information about weight. Because of that critical role, the panelists agreed that the media could provide better communication about healthy weight by:

1. Bridging the Gap between the research community and the public by serving as a translator for the conversation;
2. Working Together with fellow media sources and the private sector, encouraging both to do their part in responsibly discussing weight; and,
3. Changing the Message about weight to focus on health rather than size and encouraging and educating the public about healthy behaviors.

Expert Panel Consensus Recommendations by Objective

Bridging the Gap

The group identified the media as one of the main forums for conversations on weight. The media continues to serve as the key source for learning more about weight and weight loss and as a result it is often "the translator" between the research community and the public.

The panel identified a disconnect between how the research community and the public thinks about and discusses weight and weight-related research studies. They expressed a need for a greater

understanding of how the public uses and reacts to research to help the media talk about findings in a way that both makes them relevant to the public and helps the public manage weight-loss expectations. Therefore it is essential that the media knows how to effectively and accurately relay research findings and implications to the public as well as how to effectively and accurately inform researchers about the way the public perceives this information.

The media can serve as a bridge to:

- Inform the research community about terminology the public uses and commonly held beliefs regarding weight, body image and health.
- Educate the public by carefully and responsibly translating new research as well as explaining the breadth and depth of findings. Simply listing a few key facts without explanation of how the researchers arrived at the findings leads to public confusion and misunderstanding about the implications of the research.

Working Together To Change the Message

The panel agreed that each of us must take equal responsibility for and ownership of the issue in order to create effective change. Media can play a key role by helping the private sector, from the advertising industry to clothing manufacturers, change the conversation to focus on health, not weight.

The media can:

- Express the importance of thinking about/discussing weight and health in medical terms rather than cosmetic terms when marketing products.
- Encourage corporate responsibility in developing and marketing products by drawing attention to those that support making healthy choices easier for consumers through offering a range of affordable and attainable products and services for all consumers.

Changing the Message to Focus on Health and Weight

The panel also identified the most essential messages to be conveyed about weight and health. The following chart is a guide for ways media might construct these messages that more effectively communicates the facts about healthy weight, weight loss and body image.

Media Should Convey That:	Recommended Ways to Address
Weight is about health, not a number on a scale or appearance expectations.	<ul style="list-style-type: none"> • Focus on modest weight loss as a way to improve health for the overweight and obese. • Discuss health/weight/body size as individualized and personalized rather than as one universal ideal goal. • Discuss the importance of maintaining a healthy weight rather than achieving a goal weight/body size.
Incremental and sustained weight loss is safe, healthy and advisable.	<ul style="list-style-type: none"> • Discuss the health benefits of modest, incremental weight loss. • Express the benefits of gradual lifestyle changes for weight loss. • Make it clear that weight loss does not happen overnight; do not compress the timeline for weight loss. • Dispel the message that large and rapid weight loss is easily achievable via a few small steps/modifications. • Reframe the conversation about weight loss, removing sensational, rapid weight-loss stories. • Openly discuss the risks of rapid weight loss, including dangerous changes in key health indicators; risk of gaining back lost weight and entering a “roller-coaster” weight-loss pattern. • Place the emphasis on the weight-loss process rather than the “big reveal” after large and rapid weight loss.
Weight status doesn’t necessarily reflect health status.	<ul style="list-style-type: none"> • People carrying excess weight may be in good health. In addition, people carrying excess weight may practice healthy habits, while others may be able to maintain their weight despite poor eating

	<p>and physical activity habits or by engaging in unhealthy weight control behaviors.</p> <ul style="list-style-type: none"> • Talk about health indicators, such as A1C, cholesterol and blood pressure, and spread the message that good numbers for these health indicators are not tied to size - i.e. people who appear to have a healthy weight can have high blood pressure and people carrying excess weight can have normal blood pressure. • Educate the public about health indicators and how they affect overall well-being.
<p>It takes more than just willpower to lose weight - a strong support system is necessary.</p>	<ul style="list-style-type: none"> • Convey that personal responsibility is important for weight control but is only one part of the solution for achieving a healthy weight. • There are environmental, social and genetic factors at play when it comes to weight, body type, weight loss and maintaining weight. • The media can play a role in bridging the gap between social responsibility and personal responsibility, in part by discussing the role that the physical environment (access to healthy foods, safe places for physical activity, availability of physicians) plays in weight. • Adopt a culturally sensitive tone by understanding various racial and ethnic communities, which may experience different problems and issues related to weight that require diverse solutions. Offer equal coverage and attention to each of these communities and be sensitive to the variances in issues.
<p>BMI is one of many factors in determining a person's weight as it relates to health.</p>	<ul style="list-style-type: none"> • Communicate about what BMI is and is not by using the following information: • BMI is: <ul style="list-style-type: none"> ○ A good measure for assessing health risk on a population basis. ○ An important component in an individual's health risk assessment. ○ Individually specific, based on a multitude of factors (age, ethnicity, body type, etc.) and should be determined by one's physician. • BMI is not: <ul style="list-style-type: none"> ○ The only factor in determining a person's health as it relates to weight. BMI measures lead people to believe that there is a "magic number" that indicates overweight and obese status and reinforces the idea that there is an ideal weight for health. ○ BMI can underestimate health risks in some populations, including certain ethnic groups (e.g. Asians and Indians) and the elderly.
<p>Body size and shape are chiefly determined by inherited factors and strongly influenced by environmental factors.</p>	<ul style="list-style-type: none"> • Convey that biology and environmental factors drive a person's weight. The media should educate the public about the incredibly powerful role of genetic and epigenetic factors in determining body size and shape. Communicate that body size and shape are not choices that people make, but a combination of inherited factors and environmental influences. • Communicate more about the role of the obesigenic environment in which we live and how it affects a person's weight, both in terms of weight gain and creating a difficult environment in which to lose weight. An environment with an overabundance of largely unhealthy food with few healthy alternatives is the norm in many U.S. towns and neighborhoods and creates often times insurmountable challenges for people to effectively lose weight and keep it off.

- | | |
|--|--|
| | <ul style="list-style-type: none">• Reduce stigma around body size and shape by educating people that once someone has achieved a large body size, for any reason, it is difficult to reduce it because of the metabolic adaptation to resist weight loss. Additionally, at any size, biology drives body weight and shape and is not a choice. The media can convey that people should not be stigmatized for what is largely their genetic predisposition. |
|--|--|

NationalEatingDisorders.org



About National Eating Disorders Association

The National Eating Disorders Association (NEDA), headquartered in Seattle, Wash., a not-for-profit organization, supports individuals and families affected by eating disorders and advocates for prevention, treatment and research funding for eating disorders. NEDA also has an Executive Office in New York, NY. Since the inception of its Helpline in 1999, NEDA has referred more than 150,000 people to treatment and tallies more than 50 million hits annually on its Web site. For more information on eating disorders, visit www.NationalEatingDisorders.org.



NEDA programs include: Annual NEDA Conference; Information and Referral Helpline; National Eating Disorders Awareness (NEDAwareness) Week; Parent Family and Friends Network (PFN); NEDA Navigators; STAR Program (States for Treatment Access and Research); Young Investigators Research Grants; Media Watchdogs and Educational Materials.

About the STOP Obesity Alliance



The Strategies to Overcome and Prevent (STOP) Obesity Alliance is a collaboration of consumer, provider, government, labor, business, health insurers and quality-of-care organizations united to drive innovative and practical strategies that combat obesity. The STOP Obesity Alliance is directed by Professor Christine C. Ferguson, J.D., of The George Washington University's Department of Health Policy and former Health Commissioner for the State of Massachusetts. Richard H. Carmona, M.D., M.P.H., FACS, 17th U.S. Surgeon General and President of the non-profit Canyon Ranch Institute, serves as Health and Wellness Chairperson of the Alliance. The Alliance Steering Committee is comprised of the following public and private sector organizations: America's Health Insurance Plans, American Diabetes Association, American Heart Association, American Medical Group Association, Canyon Ranch Institute, the Center for Disease Control and Prevention's Division of Nutrition, Physical Activity and Obesity (DNPAO), DMAA: The Care Continuum Alliance, National Business Group on Health, National Quality Forum, The Obesity Society, Partnership for Prevention, Reality Coalition, Service Employees International Union and Trust for America's Health. The Strategies to Overcome and Prevent (STOP) Obesity Alliance receives funding from founding sponsor, sanofi-aventis U.S. LLC, and supporting sponsors, Allergan, Inc. and Amylin Pharmaceuticals, Inc. For more information, visit www.stopobesityalliance.org.