

# American Diabetes Association Guidelines on Addressing Weight Stigma and Bias in Obesity Care

## TRANSCRIPT

**Narrator:** Welcome to Abbott Nutrition Health Institute's Nutrition Research Reviews, highlighting current publications in the field of nutrition and clinical care.

Today's video summarizes the 2025 American Diabetes Association Guidelines on addressing weight stigma and bias in obesity care, led by Doctor Raveendhara Bannuru and the ADA Professional Practice Committee.

Weight bias refers to negative attitudes and stereotypes based on body weight. This bias can be explicit, (conscious and intentional,) or implicit, (unconscious and automatic.) Regardless, these biases contribute to weight stigma, which leads to mistreatment, reduced health care access, and poorer health outcomes for individuals with obesity.

Weight stigma is pervasive in health care settings. It can manifest in dismissive communication, inadequate equipment, and assumptions that all health issues are weight related. Holding and even expressing these stigmas not only harms patient trust, but also discourages individuals from seeking care.

To address this issue, the ADA developed recommendations through an interprofessional committee using a rigorous evidence-based process. Systematic literature reviews, expert consensus, and transparent grading of evidence ensured that each guideline reflects the best available science. This initiative resulted in three key areas of focus: Education and training, inclusive clinical environments, and respectful communication and collaboration.

Summarizing the recommendations, let's first look at education and training.

All health care professionals and staff should receive ongoing training on weight bias, beginning with early education and continuing throughout their careers. The most effective approach is multicomponent training that combines lectures, simulations and patient perspectives. This method has been shown to reduce bias and improve empathy. Specific training resources for health care professionals and individuals with obesity are listed in table one of the article.

Clinical spaces should be welcoming and accessible. This includes sturdy, wide seating in waiting areas, private areas for weight measurement, equipment that accommodates all body sizes. These changes help reduce stigma and improve patient comfort while engaging them in their care.

Finally, let's consider respectful communication and collaboration. Some helpful tips include using person first, non-judgmental language. Say "Person with Obesity," not "Obese Person." Asking permission before discussing weight and respect the patient's preferences. Working together on shared decision making that aligns with the individual's goals. It's more than just weight loss.

The ADA provides tools and checklists to support implementation, including training modules, clinical environment checklists, and communication guides. These resources help create a more inclusive and effective care experience for those with obesity. Reducing weight bias is essential to developing equitable, person-centered care to improve quality of life and functional outcomes. By adopting these standards, health care professionals can foster dignity, trust, and better outcomes for individuals living with obesity.

To learn more, scan the QR code on screen or visit the ADA's Obesity Association guidelines online.