



Communicating About Weight

Preconception Health: The Role of Nutrition

Discussing weight with a client may seem awkward, but with training and practice it becomes easier. Educators may be concerned that they will offend women or provide unwanted information. However, studies show that talking about weight helps to promote behavior change and that people counseled in a primary care setting about the benefits of healthy eating and physical activity often take positive action compared to clients who did not receive counseling. Also, people who are overweight or obese often want help in establishing and reaching weight-loss goals, including specific advice about diet, exercise and setting realistic goals. Below are some factors to consider when addressing weight.

Personal Attitudes and Beliefs Regarding Weight

What are your beliefs regarding weight and how do they affect your counseling? What are the overall environmental messages in your clinic regarding weight? Is the office equipped to work with obese women? Are conversations held in private? Do pictures and materials reflect a respectful attitude towards people of different weights? Are



you knowledgeable about community resources to support being active and choosing healthy foods?

Cultural Awareness and Competence

An important aspect of counseling is being aware of the beliefs, social norms, especially those around food and weight, and practices found among different population groups. Different population groups may hold different views regarding what is a healthy weight. This information can be gathered through observation and conversations with clients and other staff. Organizations devoted to cultural competence, literature reviews and conducting more structured discussion or focus groups with clients and/or other community members will elicit additional information.

How to Start the Conversation

Consistent with effective counseling techniques employ a respectful tone, establish rapport, use open ended questions and offer counseling messages based upon the client's needs and interests. If a motivational interviewing approach is used, work with the client to develop goals that are achievable and based upon effective strategies.

A non-judgmental attitude is important since many women have experienced discrimination and stigma because of their weight. Consider how to raise the subject and what words to use. It may be sufficient to let the client know she is in a weight category where she may want to consider weight loss, rather than state she is overweight or obese. The term "weight" may be viewed as less judgmental and clients may prefer a discussion about "excess weight," "unhealthy body weight," or "BMI".

A woman's response to initial queries about weight loss will be influenced by her priorities, needs and her willingness to make changes at this time. Use questions that elicit an understanding of her feelings regarding her weight and

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past history with weight gain or loss. Assessing a woman's readiness to change will help direct what information is provided and what goals are set. For some women who are not able to consider weight loss at this time, a goal of no weight gain may be appropriate. Some questions to begin the conversation include:

- May I talk to you about your weight?
- What are your thoughts about losing weight?
- What are your plans or goals for losing your excess weight? What is the best weight for you?
- What changes have you made? What changes have worked for you in the past?
- Are you interested in making changes to your weight at this time?
- What kind of changes would you be willing to start with? What changes have worked for you in the past?
- What kind of help would you like from me? May I offer some suggestions or share some ideas?



Postpartum Weight Loss Counseling Points

As part of WIC enrollment, women are encouraged to gain weight within a specific recommended range during pregnancy. After the baby is born, the counseling topics change to breastfeeding, infant feeding and the woman's wellbeing.

- Reinforce the importance of a healthy weight for her wellbeing and health.
- Encourage all women (with the exception of those underweight prior to pregnancy) to set a goal to return to their prepregnancy weight.
- Encourage women classified within the overweight and obese categories to consider additional weight loss. Obesity experts indicate that a five to ten percent weight loss can make a significant difference and this amount of weight loss may seem more manageable. Discuss sensible weight loss of one-half to two pounds per week.
- Suggest a weight goal of “no gain” for women not choosing to lose weight.
- Emphasize the value of eating well and regular physical activity for all women.
- Reinforce her importance in family health as a role model and gatekeeper. Her choices regarding eating and activity will affect her health and that of her family.
- When she returns to the office, offer the woman ongoing opportunities to weigh herself and brief discussions about her progress.
- Recognize and praise positive changes. Discuss setbacks, provide advice and referrals, monitor and adapt goals overtime.

Resources

1. **National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases Resources:**
 - [*Aim for a Healthy Weight - 3 Steps to Initiate Discussion About Weight Management With Your Patients*](#)
 - [*Weight-control Information Network \(WIN\)*](#)
 - [*Talking with Patients about Weight Loss: Tips for Primary Care Providers*](#)
 - [*Three steps to initial discussion about weight management*](#)
2. [**National Center for Cultural Competency**](#)
3. [**Rudd Center for Food Policy and Obesity, Preventing Weight Bias Toolkit**](#)

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