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The Shame of Fat Shaming

By GINA KOLATA OCT. 1, 2016

It is not easy to be fat in America, even though more than a third of adults are obese.

Donald J. Trump brought the issue of fat shaming to the fore during and after last week's debate, when he disparaged a former Miss Universe winner who gained weight and when he said the hacking of the Democratic National Committee's emails might have been done by "somebody sitting on their bed that weighs 400 pounds."

But there also is a body of evidence showing that the effects of fat shaming and stigmatizing go far beyond such remarks, beyond the stares fat people get on the street, the cutting comments strangers make about their weight and the "funny" greeting cards featuring overweight people. It turns out that fat prejudice differs from other forms in ways that make it especially difficult to overcome.

The problems with fat shaming start early. Rebecca Puhl, the deputy director of the University of Connecticut's Rudd Center for Food Policy and Obesity, and her colleagues find that weight is the most common reason children are bullied in school. In one study, nearly 85 percent of adolescents reported seeing overweight classmates teased in gym class.

Dr. Puhl and her colleagues asked fat kids who was doing the bullying. It turned out that it was not just friends and classmates but also teachers and — for more than

a third of the bullied — parents.

“If these kids are not safe at school or at home, where are they going to be supported?” Dr. Puhl asked.

The bullying problem is not limited to the United States. Dr. Puhl and her colleagues found the same situation in Canada, Australia and Iceland.

Women face harsher judgment than men, Dr. Puhl reports. The cutting remarks can begin when a woman’s body mass index is in the overweight range, while for men the shaming tends to start when they are obese. And women who are obese report more than three times as much shaming and discrimination as men of equal obesity.

Sadder still is the finding that people who are obese often share the same attitudes toward fat people as the rest of society. That, said Dr. Kimberly Gudzone of the Johns Hopkins University School of Medicine, “is one of the things I find most challenging and unique with weight stigma.”

Fat people, she reports, actually stigmatize themselves. They shame and blame themselves for being fat and have the same sorts of thoughts about other people who are obese. “Self-loathing,” Dr. Gudzone said, “can be a prominent feature” of being obese.

The stigma continues even after a person loses weight, Dr. Gudzone and others reported. Studies found that employers, when presented with two hypothetical candidates, are less likely to hire a formerly fat person. “They think it is a fundamental character flaw,” she said.

As a result, said Alexandra Brewis Slade of Arizona State University, many formerly fat people, including many who had been prominent in the fat acceptance movement, hide their pasts after they lose weight.

There is even a stigma surrounding the way people lose weight. The only method that is likely to lead to a large and permanent weight loss is bariatric surgery. But patients who lose weight that way often hesitate to reveal it because other people often feel it is “cheating,” Dr. Slade said.

The effects of a lifetime of shame and stigma can be profound. Fat people are more prone to anxiety and depression, and weight shaming can set off rounds of binge eating and avoidance of exercise because of embarrassment at how they look exercising and wearing workout clothes.

“There tends to be this public perception that maybe fat shaming is O.K. because it will provide motivation to lose weight,” Dr. Puhl said. Instead, she adds, “it is very harmful to health.”

The situation is better than it was a decade ago, Dr. Puhl said. Now there is widespread public support for anti-bullying laws that include protection for fat children and for laws prohibiting discrimination against obese people in the workplace. But there is still a long way to go.

Even the public health campaigns meant to prevent obesity can contribute to the stigma, researchers say, because the implicit message is that anyone who really wants to — anyone who eats well and exercises regularly — can be thin. As for children, the message is that parents should monitor kids’ body mass.

If only it were only so simple, obesity experts say. Childhood obesity stubbornly resists such fixes. As adults, fat people tend to try all sorts of weight-loss programs. If they could be thin, they insist, they would be. They certainly do not want to be fat. But other people often maintain that it is within the power of obese people to lose substantial amounts of weight if they really make an effort.

Dr. Michael Rosenbaum, an obesity researcher at Columbia University, explained: “Inevitably, you get these comments, ‘I know how to cure obesity. All you have to do is eat less.’ The idea that obesity is a disease has not caught on. The idea that once you have lost weight you are cured is wrong. Obesity is the disease that keeps on giving.”

Meanwhile, “That public health message leads to people feeling it is their fault,” said Judith Matz, a psychotherapist and author. “It implies weight is a matter of willpower.”

Gina Kolata is a health reporter for The New York Times.