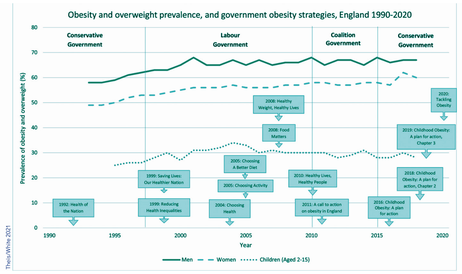
Navigating the Labyrinth of Multiple Disadvantage: Harnessing Social Prescription to Combat Weight Stigma - Helen James VCSE Nutriri

Innovating in the 'slimming club' and 'weight management' domains to reduce health inequities and support better access and engagement.

Individuals facing multiple disadvantages are enmeshed in a complex web of challenges stemming from a convergence of factors, including poverty, trauma, and discrimination. Weight stigma perpetuates and magnifies health disparities in already marginalised populations (Shaw, Meadows 2022) Weight stigma, a pervasive form of prejudice and discrimination based on body size, stands as a significant factor further complicating the lives of those already facing multiple disadvantages and health conditions correlated with higher weight. (Meunnig 2008).
However, a comprehensive approach to improving public health, independent of weight change, is offered by a user-led co-learning group, examining the impacts of diet culture, gaining consensus for 'uninvited weight talk as a core determinant of health', exploring accessible and enjoyable movement; the realities of balancing nutrition, reducing alcohol and stopping smoking. Utilising social prescription to rebuild trust, and not focus on weight as a health metric to re-engage the significant number of higher weight individuals who currently delay or withhold from engagement in healthcare, food and movement (Ryan et al. 2022). Addressing these underlying social determinants of health and fostering more inclusive communities to create a society where everyone has more opportunity to flourish.

WHY...



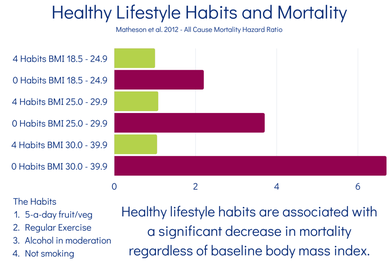
'The energy deficit approach to weight management has a high long-term failure rate... Dietetic literature on weight management fails to meet the standards of evidence based medicine' (Aphramor 2010)

- In 2023 England spent c. £785m in contracts with a weight management element (Bidstats 2023)
- In 2021/22 a £30.5m spend on Tier 2 Weight Management led to 1311 people changing 5% of their bodyweight (OHID 21/22 WMS)

what people tell us...

- food is very stressful
- my child gets bullied
- dieting has taken over my whole life
- i feel judged every day
- i won't go to the GP
- the GP blames my weight every time
- people assume i am lazy
- people assume i eat too much
- i have lost weight so many times
- i have felt depressed about this for so long

It is crucial to recognise that changes in physical activity, balancing nutrition, alcohol consumption, and stopping smoking can significantly improve public health outcomes - independent of weight change.



Healthy lifestyle habits are associated with a significant decrease in mortality regardless of baseline body mass index.

- working 'weight neutrally' is not in contra-position to the science of metabolism
- different weights can impact health in different ways
- trying to 'solve obesity' at population level has not worked out (Theis, White 2021)
- remaining focused on 'weight change for health' is widening the health equity gap
- all cause mortality is near equalised across BMI through behaviours - not weight change!

WHAT...

Addressing weight stigma and its intersection with multiple disadvantage requires a holistic approach that reduces individual blame, and focuses on cohesive action, within the systems and community, to shift societal biases.

By listening to lived and living experiences, since 2015; we've gathered ongoing consensus to co-design workforce training and citizen courses for continued knowledge mobilisation. Co-creating a viable alternative to 'slimming club' referral and strengthening social prescribing systems in the process.

Anti-bias workforce training hosted on a co-learning hub adapted for social prescribers, fitness professionals, nutritionists and any role tasked to talk about weight.
'Weight Management' transformed into Nutrition Management - Movement Management

training timeline

- ONE — Training group identified and invites sent to access the course and forum areas
- TWO — Co-learner decides whether to interact as themself or choose a screen-name
- THREE — 'before' survey on weight neutral awareness offered to measure impact
- FOUR — LAUNCH SESSION - the start of creating large scale change together
- FIVE — 'What is weight neutral?' section opens on the co-learning hub
- SIX — 'What is weight stigma?' section opens on the co-learning hub
- SEVEN — 'Health Inequalities & Determinants' section opens on the co-learning hub
- EIGHT — 'What to Measure Instead' section opens on the co-learning hub
- NINE — 'Resources & Further Research'' section opens and develops through the co-learning hub
- TEN — 'after' survey on weight neutral awareness to measure impact

...leading to social prescribing for holistic 'weight neutral' food and body ease courses, memberships, community building - digital and in-person weekly meetings...

body ease	food ease
AS YOU ARE — '8 billion kinds of normal' your BODY thoughts	FEEDING HUNGER — finding what matters to you your FOOD thoughts
BODY TRUST — body appreciation letting go of attachments	DESIRED FOODS — improve food relationships food for fuel and pleasure
MOVE FOR JOY — acknowledging all movement unattaching from outcomes	IN THE MOMENT — getting present with food vs. past/future food thinking
ACTIVE ACCEPTANCE — empowered by acceptance the 'mechanics' of judgement	FINDING FULL — to let go of restriction building self-trust
THOUGHT WELLBEING — you've always been your best self compassion	CRAVINGS NEXT TIME — breaking the cycle where are you now?

OUTCOMES...

During a series of test and learn pilots we used Happiness Pulse (SWEWBS and ONS4) for quantitative scoring and anonymous feedback routes for qualitative evaluation.



Data correct July 2022

working weight inclusively can help an organisation to...

- increase recall and engagement with core health groups and general population
- contribute to reducing health inequalities
- refocus on managing health instead of weight change
- sustain beneficial behaviours and reduce long term all cause mortality risk
- support inclusive staff wellbeing

what people tell us after...



Aphramor 2010
Bidstats 2023
Matheson 2012
Muennig 2008
OHID 21/22 WMS
Ryan et al. 2022
Shaw, Meadows 2022
Theis, White 2021

nutriri CO-LEARNING HUB
CORE20PLUS5 NHS Core20PLUS Ambassador
Working Weight Neutrally to Improve Participation and Health Equity Workspace — Find resources, share ideas and collaborate
FutureNHS Collaboration Platform