

Weight Bias. Nature, Consequences, and Remedies. Edited by Kelly D. Brownell, Rebecca M. Puhl, Marlene B. Schwartz and Leslie Rudd; The Guilford Press, New York, New York; 2005; ISBN: 1-59385-199-5; \$35 (hardcover); 320 pp.

As Jennifer Crocker and Julie Garcia, authors of one of the chapters of this book point out, "Americans are becoming increasingly overweight. Currently, 127 million (64.5%) adults in the United States are overweight, 60 million (30.5%) of all adults are obese, and 9 million (4.7%) are severely obese (American Obesity Association, 2002). Yet, even as more Americans become overweight, the standard for attractiveness is thin and fit, and overweight people are stereotyped as lazy, lacking self-discipline, and mentally slow" (p. 165). (Actually, the numbers are creeping up—in 2003–2004, 32.2% adults in the U.S. were obese (1).) Where is the notion of laziness, mental slowness, lack of discipline and other negative attributes coming from? As this edited volume postulates, it stems from the weight bias or discrimination based on body shape and size. The prejudice, bias or discrimination of people with obesity is fairly common in our society. Yet, it seems that we have not addressed and studied it as well and comprehensively as other biases.

This edited volume provides a thorough review of various aspects of weight bias. Following the Introduction, the book is divided into four parts (total of 22 chapters) and Summary and Concluding Remarks. The first part, "Nature and extent of weight bias," consists of five chapters outlining weight bias in various settings (chapter 1—employment; chapter 2—health care settings), groups (chapter 4—child's world; chapter 5—teen's world), and the portrayal of weight in the media and its social impact (chapter 3). The chapter on weight bias in employment brings up an important issue—that, "despite the fact that fat people are discriminated against, much of the research on the well-established relationship between fatness and poverty in Western culture has hesitated to conclude that fat people become poor because of this level of discrimination" (p. 22) and instead of that entertains the notion that fat people became fat because they are poor and don't have access to nutritious food, safe exercise, etc. The chapter on weight bias in the child's world reminds us that the consequences of childhood weight bias include issues such as victimization, interpersonal, psychological and academic and occupational negative consequences, and negative impact on the quality of life.

Part II, "Origins, explanations, and measurement," reviews in four chapters attributes and weight-based prejudice, social consensus and the origins of stigma, theories of stigma, and measurements of stigma. The chapter on social consensus notes that the notion of prejudice and stereotypes being developed and maintained as a result of social consensus information is based in group-norm theory (p. 98). According to this theory, prejudice develops as a result of the group socialization process, which involves group formation, identification, and continuous interaction. Group members pressure each other to conform to group norms and standards and ignore, punish, or reject those individu-

als who deviate from group values (p. 98). This theory also postulates that changing group attitudes is more effective than changing individual attitudes because individual beliefs are based on group norms. This all fairly well applies to our societal attitudes toward overweight and obese individuals.

The chapter on theories of stigma reviews five contemporary theoretical approaches to stigmatization: stereotype content model, intergroup emotions theory, sociofunctional approach, system justification approach, and justification-suppression model. The authors warn about the troublesome aspect of the sociofunctional approach, as it could be interpreted as supporting the avoidance (at best) or destruction (at worst) of obese individuals (p. 113). The chapter on measurements of the bias discusses explicit (e.g., Anti-Fat Attitudes Test), implicit, and behavioral/rejection measures of bias.

Part III, "Consequences of weight bias," first presents three chapters addressing the effects of weight-related teasing in adults (chapter 10), social consequences of weight bias by partners, friends and strangers (chapter 11), and the relationship between self-esteem and the stigma of obesity; and then concludes with a chapter entertaining personal reflections "on bias, stigma, discrimination, and obesity." The most interesting chapter of this section is the one on self-esteem and stigma. It discusses the vulnerability and protective factors, such as attributions to prejudice, the perceived controllability of weight, the Protestant ethic, and externally contingent self-worth. The most entertaining and insightful is the personal reflections chapter. Besides personal memories of bias and discrimination of an overweight person, the author of this chapter also proposes some remedies of weight bias, such as educating the public, educating health professionals, educating parents, teaching acceptance to children, protesting negative portrayals of larger people, and employing a positive, confident attitude to repel discrimination. The author also skillfully describes parallels between public views of obesity and public views of mental illness, although, as she reminds us, mental health advocates are now doing a better job battling the stigma of mental illness than the advocates of obese people.

The last part, "Remedies," discusses different remedies of the weight bias, such as legal approaches (chapters 14 and 15), improvements in medical practice (chapter 16), improving the health care system (chapter 17), improving the fitness landscape (chapter 18), changing media images of weight (chapter 19), various coping mechanisms for weight stigma (chapter 20), advocacy (chapter 21), and changing biases against obesity in public policy. There are several interesting and important issues to realize and think about that are discussed in this part. For instance, there are currently no federal laws and only a handful of state and local laws that expressly prohibit discrimination on the basis of weight, or more generally, appearance (p. 195). "Denying a person a job, a seat in a restaurant, or access to a movie theater is not going to make him or her, or anyone else, any thinner or healthier, or improve us as a

society” (p. 207). “Obesity, by virtue of its rather unique status as a ‘semi-disease,’ has long been treated by anecdote and untested methods” and “medical school curricula have avoided the topic and, consequently, side stepped the issue of weight and obesity management” (p. 227) (interesting, in view of a much more enlightened and aggressive approach toward smoking and substance abuse in general). The most important and interesting are the presented American Obesity Association advocacy goals, e.g., 1) The creation of a National Institute of Obesity Research at the NIH, 2) Coverage of obesity treatments in federal health plans such as Medicare and Medicaid, 3) Modernizing guidances of the FDA for the development of a new generation of drugs to treat obesity, 4) Bans on discrimination against persons with obesity in health care, education, and employment, 5) Creation of an Office of Obesity Policy in the Secretary of Health and Human Services Office (pp. 301–302), among others.

The concluding remarks emphasize that it is critical for our society “to address the epidemic of obesity without further stigmatizing individuals,” and that “reliance on the concept of personal responsibility for weight has not only contributed to stigma, but has dangerously delayed viewing obesity as a public health issue and prevented the needed shift to public health strategies for obesity intervention and prevention” (p. 308).

Though the topic of this book may sound distant and not very clinically relevant, it touches some very important issues. It reminds us that, at least for some of our patients, obesity is not just a simple “deliberate overeating, and lack of exercise and self-discipline,” but a much more complex issue on a personal and societal level. It does not defend obesity, and acknowledges its negative consequences. It brings to the picture the fact that overweight/obese people face enormous biases, which, as any other bias, should be seriously and vigorously addressed on all levels. It also reminds us that obesity is quite a serious issue, which is only becoming adequately addressed by the society and the health care profession. The book is well structured and relatively well edited.

In sum, it is not bad bedtime reading.

REFERENCE

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