Midlothian Integration Joint Board

Thursday, 9 October 2025, 14:00-16:00

Public Health Update – Weight Stigma and Bias Training Programme

Item number: 5.11

Executive summary

This report sets out an update of the Weight Stigma and Bias Training Programme.

Weight stigma has been defined as negative attitudes towards, and beliefs about others because of their weight.[1] These negative attitudes are manifested by stereotypes and/or prejudice towards people with overweight and obesity.

This twelve month pilot project (February 2025 – February 2026) targets healthcare professionals, teaching and support staff who are in contact with people living with overweight or obesity. The training aims to:

- improve awareness, knowledge and understanding about the impact of weight bias and stigma
- improve confidence and skills to have conversations about healthy weight and to challenge stigma
- encourage participants to reflect on and modify their own practice as appropriate

The training programme has been developed with professional guidance to ensure we are delivering the most up to date evidence on the issue. We have also had 'lived experience' input keeping people living with overweight and obesity at the heart of our programme.

The delivery phase started in August 2025, and a number of sessions are planned.

As a result of this report, Members are asked to:

- Note this update and promote the programme to relevant staff groups
- Continue to endorse initiatives that impact positively on NHS Lothian's obesity position

[1] Weight bias and obesity stigma: considerations for the WHO European Region (2017)

Public Health Update – Weight Stigma and Bias Training Programme

1 Purpose

This report sets out an update on the Weight Stigma and Bias Training Programme.

2 Recommendations

2.1 As a result of this report, Members are asked to:

- Note this update and promote the programme to relevant staff groups
- Continue to endorse initiatives that impact positively on NHS Lothian's obesity position

3 Background and main report

3.1 Weight stigma is a key barrier to reducing and prevention obesity. It has been defined as negative attitudes towards, and beliefs about others because of their weight.[1] [2]These negative attitudes are manifested by stereotypes and/or prejudice towards people with overweight and obesity. Weight stigma often results from weight bias and can happen across different sectors, such as healthcare, education, employment, the media, in the community and at home[2]. Added to this, self-stigma where an individual endorses the negative messages can exacerbate the situation.

Today, the majority (67% [3]) of the adult population in Scotland is living with overweight or obesity particularly so for those living in our more deprived areas. In Scotland's adult population, socio-economic inequalities in obesity have persisted over time. In children, the socio-economic inequalities related to obesity are increasing. Almost 1 in 5 children[4] are at risk of living with overweigh/obesity by the age the time the start primary school (22% for Scotland).

There are many complex factors relating to Obesity. This can be clearly seen in the Foresight Tackling Obesities Future Choices – Project Report[5] systems map which is made up of a series of interconnected 'sub-systems': which highlights the complexity and suggests that whole systems approaches could help tackle complex health conditions like obesity.

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[1] Weight bias and obesity stigma: considerations for the WHO European Region (2017)
[2] Flint SW. Weight stigma and discrimination: Time for change! Nutrition Bulletin. 2019;44(3):249–53.
[3] Scottish Health Survey (2023)
[4] Primary 1 Body Mass Index (BMI) statistics Scotland – School year 2022 – 2023 – Public Health Scotland
5 Tackling Obesities: Future Choices. Foresight, October 2007,

3.2 Size and Scale of Problem

We know that overweight and obesity is a significant issue for the population but from the evidence base we don't really know to what extent stigmatising and discriminatory attitudes and behaviour impact on people locally.
In August 2024, Obesity Action Scotland Factsheet reported[3]

- 58% of the adult population in Lothian are living with overweight and obesity – 24% have obesity
- 52% of pregnant women were living with overweight and obesity - 23.3% had obesity (year ending March 2023)
- Approx 40,000 people in Lothian (2021) had been diagnosed with type 2 diabetes and this is increasing. Prevalence in Lothian - 5.9% (Scotland 5.4%). In July 2017, **5,533** Midlothian residents had been diagnosed with Type 2 diabetes, 65% of whom are males (SCI Diabetes, 2021)
- 19.1% of primary 1 children in Lothian are at risk of overweight and obesity 2023/24[7]
- In 2023, the Lothian Public Healthy Survey [8] asked 14,825 adults (aged 16 and over) across Lothian, including 2,961 from Midlothian, for their height and weight measurements. The **self-reported data** showed that the most common weight category for people in Midlothian to fall into is the "Pre-obesity" (also known as "overweight") category.

3.3 The Training Programme

This twelve month pilot project will contribute towards Midlothian's Whole System Approach relating to wider obesity work happening at NHS Lothian board level. It focuses on building the skills and confidence of healthcare and education professionals and support staff who are in contact with people living with overweight or obesity. The training and education programme will raise awareness of the impact of weight stigma and bias and teach participants to have constructive, non-stigmatising or discriminatory conversations with people, families and colleagues around weight. It will also support participants to challenge stigmatising attitudes and behaviour.

The training programme has been developed and designed to be flexible and adaptable to suit the needs of specific target groups and delivered via TEAMS or face to-face in bite size sessions lasting 30 minutes up to longer in-depth sessions lasting up to two hours.

The training has been designed to be engaging, interactive and thought provoking.
A full content plan has been developed with a range of topics covered including:

- What is weight stigma and bias
- Size and scale of the problem
- How and where it may manifest itself

[3]Obesity Action Scotland Factsheet. Obesity Prevalence Lothian Health board Area. August 2024
[7]Primary 1 Body Mass Index (BMI) statistics Scotland – School year 2022 – 2023 – Public Health Scotland
[8]The Lothian Public Health Survey 2023

- Why it's important for staff in education and healthcare settings to be aware, understand and have skills and confidence to address situations
- Impact/consequences for people living with overweight and obesity including mental health
- Importance of physical environments
- Having an appropriate conversation – importance of language
- Strategies to reduce weight bias
- Signposting

3.4 Deliverables to date

The programme is now in the delivery phase, and this will last between August – mid December 2025.
Presentations that have helped raise awareness include:

- Allied Health Professionals leads meeting
- Dietitians Joint Service and Team Leads meeting
- Bariatric Care Forum
- GP Lead Reps Meeting
- GP Quality Improvement Lead

The following training sessions have been confirmed to date with more anticipated:

- 5 x GP Practices
- 1 x Practice Nurse Leads
- 1 x School Nurse and support team
- 1 x CTAC nurses
- 1 x CPD session with Chalmers sexual health team
- 1 x Physios and OT group
- 1 x Corporate Parenting Event

3.5 Monitoring and Evaluation

The pilot programme will be monitored and evaluated to establish if the work that has been delivered has made a difference. A quality improvement approach will be used where possible, learning as we progress and amending the content and approach as required based on feedback.

To date, evaluation from one event has been analysed and can be summarised as follows:

- 100% of participants agreed or strongly agreed that the content was relevant to their role
- 100% of participants agreed or strongly agreed that the training had given them increased confidence to have a non-stigmatising conversation about weight

Participants were asked to provide examples of how they felt about the training and things they would do differently as a result of attending including:
" I will be more conscious of the words I use"

"I feel I could start a conversation more confidently with a parent if I had concerns about their child's weight"
"I think I will feel more confident when speaking to others about weight stigma issues"
"it made me challenge my thoughts on why I was hesitant when addressing conversations about weight. Made me think about my tone, body language and general language when approaching parents"

Quantitative and qualitative methods will be used and results from the evaluation will feature in the final project report:

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- **Formative Evaluation –** used to assess progress and effectiveness of the programme while it is still being implemented. It will be used for quality improvement purposes and to assess if the project is aligned to intended goals.
- **Summative Evaluation –** used to determine whether the project has achieved it's intended goals and objectives by assessing the overall effectiveness on completion. This work will help inform whether the project should continue or end.
- **Process Evaluation –** used to assess how the project has been implemented including whether it has reached the intended audience, participation rates, quality of delivery and degree to which the project has been implemented as intended.
- **Outcome Evaluation –** used to assess whether the project has made a difference. We will establish where feasible whether participants knowledge, skills and intended behaviours have changed as a result of the training.

4 Policy Implications

4.1 This project is part of the Type 2 Diabetes prevention programme and is supported by current national and local policy direction

- Prevention and early intervention
- Supporting management of long-term conditions
- Dignity and respect
- Reducing health inequalities

5 Directions

5.1 This report Links to 2023/2024 Directions: (Public Health Team Plan)
1 – Health and Wellbeing
2 – Positive experience and dignity
3 – Health inequalities

6 Equalities Implications

6.1 An Equality and Children's Rights Impact Assessment (ECRIA) screening tool has been completed and submitted with this report. It is proposed that the Project Steering Group will undertake an ECRIA at their next meeting in late October.

7 Resource Implications

7.1 The project has been jointly funded by NHSL Public Health and MLHSCP for 12months.

7.2 Before the project ends, a report will recommend whether the work is viable, sustainable and has been effective in reaching the intended target group, while achieving agreed outcomes. Without specific ongoing funding, the exit strategy will consider delivering 'train the trainer sessions' so that existing staff can continue the work if there is capacity.

8 Risk

8.1 There is a risk that the work will not be continued even if the project evaluates positively due to lack of budget or staff capacity to promote and deliver future sessions.

8.2 To mitigate this risk the Steering Group and project manager (prior to end of contract) will:

- Engage regularly with key stakeholders to anticipate barriers
- Provide opportunities for training until mid December 2025
- Explore whether 'train the trainer' sessions should be offered – design and deliver these if required
- Produce a final report that strategic groups can review and refer too

9 Involving people

9.1 A focus group discussion was arranged through the **Lothian – South East Eating Disorders Scotland Service** inviting participants to share their experiences of stigmatising or discriminatory attitudes and behaviour regarding their weight. Their feedback and responses were an integral part of the programme and with consent were used as scenarios and case studies to raise awareness and highlight key issues such as the importance of using appropriate language and phrases, how to ask the right questions, understanding what matters to the individual and what support they may need.

3 participants took part in a discussion facilitated by the Project Manager for the Weight Stigma Training Programme that lasted just under 1.5 hours. Feedback from participants to date confirmed that lived experience was key to their overall learning.

10 Background Papers

10.1

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Appendices: