

# Mental wellbeing, physical health and weight (for providers)

Your patients' mental wellbeing can have an impact on their physical health and weight. This resource provides information and strategies to help make positive changes.

## The relationship between mental and physical health

There is a two-way relationship between mental and physical health. Your patients' moods, feelings and overall mental health can influence their food choices, exercise levels and sleep quality. Similarly, these factors can affect how they feel and their overall mental health.

Living with mental ill health can make it challenging to stay in good physical health due to:

- reduced motivation and/or energy levels to engage in physical activity and meal preparation
- side effects of medications, including changes in hunger and fullness signals and increased cravings for sweet foods and beverages
- reduced motivation to seek medical and social support.

## The impact of weight stigma and bias

People living in larger bodies are often victims of weight related negativity, bias or bullying, which can make it more difficult to adopt or maintain healthy behaviours and seek professional support.

Being discriminated against because of body weight is a risk factor for mood and anxiety disorders. In fact, regardless of **body mass index** (BMI) and other mental health risk factors, people who have been discriminated against because of their weight are 2.5 times more likely to experience a mood or anxiety disorder.

Furthermore, weight bias can contribute to an increased risk of long term cardiometabolic health issues and early mortality in people living with overweight and obesity.

The good news is that work is being done at a state, national and international level to address weight stigma, bias and how our society talks about weight.

## Weight bias in health care settings

There is an increasing amount of research that shows the presence of weight bias among health care professionals (HCPs) across a variety of health care settings. Weight bias has been reported in physicians, nurses, dietitians, physiotherapists and psychologists.

The presence of weight bias in a health professional's discussions with their patients can result in reduced patient motivation and compliance as well as lower engagement with health care services.

In addition, weight bias in HCPs can negatively influence the client-provider relationship and the provision of care, which consequently reduces participation in the health care system for individuals living with significant weight gain.

Being aware of your own biases and working to overcome them is an important step in providing supportive and effective patient-centred care for people living in larger bodies.

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## Mental health, eating disorders and higher body weight

Living with mental ill health (including anxiety, depression, self-harm and obsessive-compulsive disorder), low self-esteem and a history of trauma are all linked to an increased risk of eating disorders.

Eating disorders can be present in people of any body weight, shape or size. In fact, people with a high BMI are at a greater risk of disordered eating. Binge eating disorder is the most common eating disorder and it is often associated with a higher body weight.

People living with an eating disorder are more likely to seek weight-reduction advice, rather than treatment for their eating disorder. As a result, health professionals should screen for eating disorders when caring for patients with higher weight.

### Helpful tips for your patients

#### Adopt sustainable healthy behaviours

Rather than focusing on weight loss, encourage your patients to adopt sustainable healthy behaviours instead. This simple change of focus can take the pressure off your patients' weight and have a positive impact on their health and wellbeing, regardless of whether they have a change in body weight.

Your patients can start to adopt sustainable healthy behaviours by:

- setting small, achievable goals that will help them increase their self-confidence and maintain motivation over the longer term
- doing activities that they find enjoyable, interesting, relaxing or satisfying and will be likely to sustain
- joining exercise classes or sports clubs
- planning activities with friends and family
- going for a 30-minute walk before or after work or during their lunch break
- making a plan to become more active and sticking to it as closely as possible
- eating healthy food including five serves of vegetables and two serves of fruit every day
- getting enough sleep (adults aged 18 to 64 years should aim for seven to nine hours per night).

#### Create a routine for healthy behaviours

Your patients can create a routine for sustainable healthy behaviours by:

- setting a regular bedtime and waking time to improve sleep quality
- choosing regular times to exercise doing an activity they enjoy
- planning meals in advance for the upcoming week
- having regular mealtimes, especially for breakfast. If patients cannot tolerate a meal after waking, eating a mid-morning snack/meal can help avoid excessive hunger which may lead to energy dips and/or mood swings.

#### Minimise stress with mindfulness and relaxation

Your patients can work on minimising stress by:

- using mindfulness and relaxation apps (such as Headspace, Calm or Smiling Mind) on a smartphone or tablet to access a variety of guided techniques and meditations
- trying gratitude journaling every morning or evening to help them focus on and appreciate the good things in their life. All they have to do is write down a few things they are grateful for/looking forward to that day or the following day.

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## Take a multidisciplinary approach

- Psychologists can provide support with mental health conditions, emotional eating, low self-esteem and body image. Psychologists must be involved in the treatment and management of patients with an eating disorder.
- Dietitians can provide ideas on how to take the stress out of healthy eating, address emotional eating, manage appetite and satiety, and support overall improved nutrition status. Alongside psychologists, dietitians also play a key role in the treatment of eating disorders.
- Consider referring patients to a dietitian or psychologist that promotes weight-neutral care or is Health at Every Size (HAES) verified. The HAES approach promotes balanced eating, life enhancing physical activity and respect for the diversity of body shapes and sizes, free from weight bias and weight discrimination. To find a HAES verified provider near you, visit the [HAES Australia website](#).

## Further information

To find out more about how to support people living with, or at risk of, overweight and obesity, complete the online weight-management [education modules](#) for health professionals on the SHAPE website.

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