

Building Trust in Obesity Care

Building trust in obesity care begins with understanding each person's unique lived experience, values, and goals. Small shifts in communication can foster respectful, person-centered partnerships and support shared decision-making.

Sources of Trust Gaps

Weight Stigma and Weight-Centric Assumptions

Individuals may feel unheard, stigmatized, or have health concerns attributed primarily to their weight.



How to Bridge the Gap

Listen and Validate

Active listening and validating an individual's lived experience can build trust, foster respectful partnerships, and support collaborative care.

TRY THIS

Begin by asking about and acknowledging the person's experiences, concerns, and goals before discussing care options.

Providing Generic Advice

Recommendations may not align with an individual's circumstances, preferences, or priorities.



Individualize Care

Understanding an individual's lived experiences, priorities, values, and goals supports personalized, person-centered care.

TRY THIS

Ask about previous experiences with weight, health, and treatment approaches to better understand needs and preferences before discussing care options.

Relying on Clinical Perspective Only

Important aspects of a person's needs, strengths, and concerns may be overlooked when lived experience is not incorporated into care planning.



Integrate Perspectives

Integrating clinical expertise with lived experience can support shared decision-making and a more personalized care pathway.

TRY THIS

Identify one opportunity within your care pathway to incorporate lived-experience perspectives and support shared decision-making (e.g., patient peer support groups or community health partnerships).

Choose one communication strategy to implement this week and reflect on how it supports trust, respect, and person-centered obesity care