



## Begin the Conversation About Weight and Pregnancy

As a healthcare provider, you know that a woman's weight may affect her pregnancy, the birth, and, in the long term, her own and her child's health. Some women may worry that their providers will judge them for being obese. Here are some ideas to help you communicate effectively with and provide prenatal care to women who are obese or overweight.



### 1. Remind yourself that:

- **Prenatal care is important for all moms-to-be—including those who are overweight or obese.** A prenatal care appointment could make the difference between a healthy pregnancy and pregnancy complications. Patients who have a negative experience with a provider might forgo the prenatal care they know they need.
- **Psychosocial determinants of health play a role in obesity.** Talk to your patients about the factors that can influence their eating habits, physical activity, and weight. These factors may come from both home and work environments and can include finances, interpersonal relationships, family, culture, genetics, and a variety of stressors.
- **Language matters.** Some women respond better to certain terms. Choosing words carefully may keep women from feeling stigmatized or judged.
  - *"Plus-size," "women of size," or "because of your size" instead of "obese"*
  - *"Eating habits" instead of "diet"*
  - *"Physical activity" instead of "exercise"*



### 2. Use active listening and reflect on the patient's thoughts, feelings, and experiences to learn about her challenges and identify ways to support her.

- **Example:** *"Tell me about your lifestyle. Are you physically active? How would you describe your eating habits?"*



### 3. Explain body mass index (BMI) and how it relates to health.

- **Some patients may be unfamiliar with the term or misinformed about what it means.** Explain that healthcare providers use BMI to determine whether someone has excess weight. It is one of many factors that providers use to assess health risks during pregnancy.
- **Work with each woman to create a healthy pregnancy plan specific to her needs.** Explain that taking into account all of her risk factors, health history, and other concerns promotes the best pregnancy outcomes.



### 4. Consider bringing up weight within the context of specific symptoms or concerns.

- **Example:** “You mentioned fatigue and aching knees. Would you like to talk about things you can try to help you feel better?” If she says no, respect her choice and postpone the conversation.



### 5. If the patient wants to discuss healthy behaviors, determine how ready she is by suggesting specific actions and helping her set achievable goals.

- **Example:** “How likely are you to consider a couple of small lifestyle changes, like eating one more serving of fruit or vegetables each day? That kind of small change can make a difference.”



### 6. Discuss any potential barriers to healthy behaviors, and suggest manageable, specific actions to help address them.

- **Example:** If the woman says she doesn't know how to eat healthy, refer her to a registered dietitian or nutritionist you know or to the Academy of Nutrition and Dietetics' Find a Registered Dietitian Nutritionist online referral service. (<http://bit.ly/2nD17eJ>)

## Sources:

- ACOG Committee Opinion No. 763: Ethical Considerations for the Care of Patients With Obesity (<http://bit.ly/20fhN8J>)
- ACOG Practice Bulletin No.156: Obesity in Pregnancy (<http://bit.ly/2ycF7ZO>)
- STOP Obesity Alliance. Why Weight? A Guide to Discussing Obesity & Health With Your Patients (<http://bit.ly/2JZOgdP>)

Visit <https://nichd.nih.gov/Pregnancy4Everybody>  
for more information and resources.

