For more context, review the “Body size” section of the Inclusivity Style Guide. Use this tip sheet in combination with the “General guidelines” tip sheet.

### Avoid stigmatizing terms

Use comparative terms such as “higher weight” rather than the medical terms “obese” and “overweight.”

**Example**

✔️ **Use:** larger-bodied people

✘ **Avoid:** people with obesity

### Don’t conflate weight and health, but also avoid healthism

Don’t assume that higher weight causes poor health. Also recognize that higher-weight people deserve equitable treatment regardless of what their health is.

### Provide context

When making statements about weight, ensure they are backed by strong science. Provide context about the limitations of studies, the harms of intentional weight loss, the myriad factors that contribute to links between weight and health outcomes, and researchers’ conflicts of interest.

**Example**

✔️ **Use:** Participants were drawn from [criteria for participating in the study]. [Number of participants] lost on average [overall number and percentage of starting weight] after [amount of time]. This change remained after controlling for [factors controlled for]. [Number of people] dropped out of the study because of [reasons].

✘ **Avoid:** The drug successfully led to long-term weight loss in a large sample.

### Avoid problematic frames

Avoid framing higher-weight people as an epidemic, a source of blame, or a burden. Avoid describing weight loss, thinness, or dieting as universally good goals that are easy to attain.

Like what you’ve read? See the full guide from the American Chemical Society.

[www.acs.org/inclusivityguide](http://www.acs.org/inclusivityguide)