When Knowing Hurts: Self-Perceived Overweight Predicts Future Physical Health and Well-Being

Eric Robinson
Obesity everywhere

But ironically under-detected
Overweight Adults (BMI of 25.0-29.9)

![Pie chart showing the proportion of aware and unaware overweight adults.]

**Research Article**

Weight status misperceptions among UK adults: the use of self-reported vs. measured BMI

Eric Robinson* and Melissa Oldham*
Crisis

Nearly all obese people are in denial about their size: 90% don't think they have a weight problem because bigger sizes are becoming the new 'normal'.

- Cancer Research survey found fewer than 10% of people who are clinically obese accept they have a serious weight problem.

In need of intervention
What if knowing hurts?
Why could it hurt?

Self identifying as being ‘overweight’ could be psychologically scaring and a potent psychological stressor.
Why could it hurt?

Self identifying as being ‘overweight’ could be psychologically scaring and a potent psychological stressor

Self-worth > Depression

Stress > Subjective and Objective Ill Health
Present Research Question

Q) What happens to people that are aware vs. unaware they are overweight?

Longitudinal effects on….

- Depressive symptoms
- Self-reported health
- Physiological dysregulation
Sample

Add Health (National Longitudinal Study of Adolescent Health)

Waves 3 (**BASELINE 01/02**) and 4 (**FOLLOW-UP 08/09**)

N = 3,582

<table>
<thead>
<tr>
<th>Perceived overweight (%)</th>
<th>41.82</th>
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<tr>
<td>Age (years)</td>
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<tr>
<td>Baseline</td>
<td>M = 21.80 (SD = 1.81)</td>
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<tr>
<td>Follow-up</td>
<td>M = 28.80 (SD = 1.78)</td>
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<td>Sex (% female)</td>
<td>56.31</td>
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<td>White (%)</td>
<td>72.30</td>
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Key measures

Weight Perception
“How do you think of yourself in terms of weight?”
very underweight, underweight, about right, overweight, very overweight

Depressive symptoms
Center for Epidemiological Studies Depression Scale (Radloff, 1977)
9 items, during previous week.. “I…."

Self-reported health
In general, how is your health?” (Ganna & Ingelsson, 2015).
1 (poor) to 5 (excellent)

Physiological dysregulation
Biomarkers of cardiovascular, inflammatory and metabolic system functioning
considered to capture cumulative biological risk
Regression Analyses

Self-Perceived Overweight Predicting:

- Depressive symptoms
  7 year follow up, controlling for baseline scores

- Self-reported health
  7 year follow up, controlling for baseline scores

- Physiological dysregulation
  7 year Follow up, no baseline

Covariates
Baseline BMI, waist circumference, age, sex, race, education, income, and the presence of a limiting health condition
Effect of self-identified OV vs. Not

** After adjustment for covariates, but results remain the same irrespective
Conclusions/Thoughts

1) Self-identification of OV associated with future ill health

2) Causality?

3) Where does that leave us with intervention?

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**Moderation**

Not moderated by Gender
Depression & health not moderated by baseline BMI
Biological risk moderated by baseline BMI

**Weight gain as a mediator:**
Explained 18% of self-reported health effect
Explained 46% of biological risk effect
Did not explain depression effect