

The Link Between Obesity and Mental Health in Adults in the UK

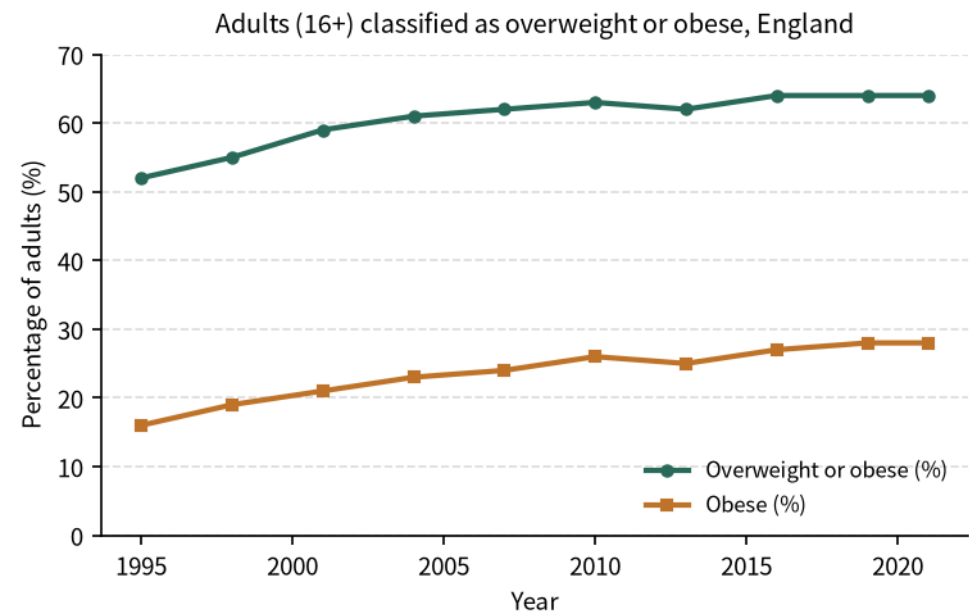


Figure 1. Adult overweight & obesity trend, England. Source: NHS Digital / Health Survey for England.

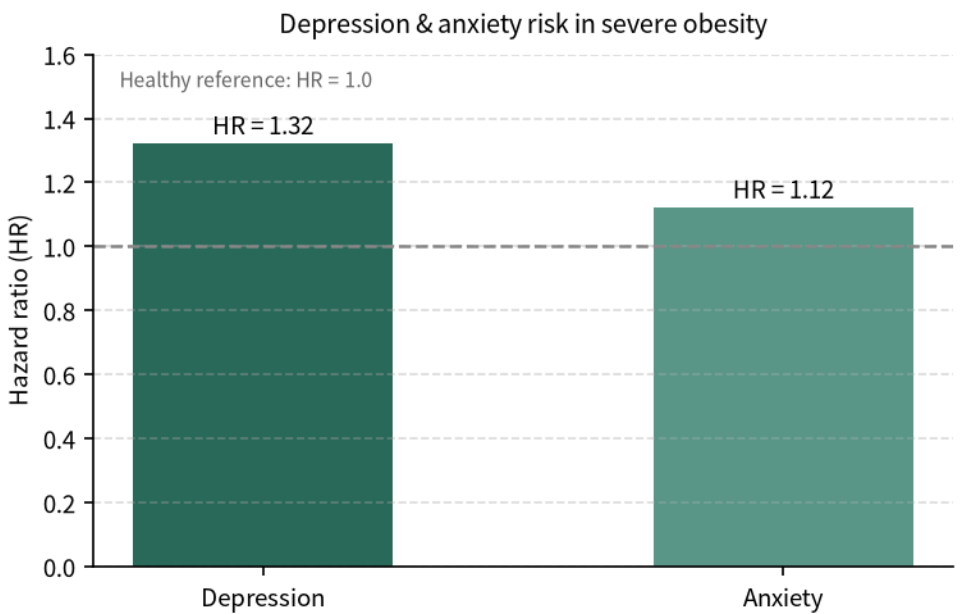


Figure 2. Depression & anxiety risk in severe obesity. Source: UK adult cohort.

AIM

To look more closely at how obesity and mental health might be connected in adults living in the UK, and to consider what this could mean for health and social care practice. As rates of obesity continue to rise and mental health services face growing pressure, clarifying this relationship has practical value for commissioners and practitioners alike.

Objectives

1. To explore whether obesity may be linked to a higher risk of depression and anxiety.
2. To consider how weight stigma and discrimination might affect people's mental wellbeing.
3. To understand how these two issues may influence each other in both directions.
4. To review current support and suggest what might work better for integrated care.

Methodology

Data Collection Method

I chose a secondary qualitative research design, which means I looked at studies other researchers had already carried out, rather than speaking to participants myself. This seemed a good fit

because it may allow a broader view than any single study could possibly give, and it avoids the time and ethical demands of recruiting new participants.

I gathered data by searching published research through three databases — PubMed (MEDLINE), Cochrane Library, and ProQuest — in March 2024. I used Boolean search strings combining MeSH terms with ordinary keywords, such as obesity, mental health, depression, anxiety, and UK adults, to try not to miss relevant studies. My inclusion criteria asked for peer-reviewed studies on obesity, mental health, and UK adults; studies not available in English or focusing only on children were excluded. Titles and abstracts were screened first, then full texts were checked against the criteria before the final studies were chosen. I also checked the reference lists of included reviews to

identify any additional studies the database searches may have missed. Of 968 records identified, 10 met the criteria. Most used quantitative designs, many measured depression, and several were systematic reviews or meta-analyses.

Data Analysis Method

I analysed findings using thematic analysis, following the six steps suggested by Braun and Clarke (2021): getting to know each study, coding key points, looking for common themes, checking them, naming them clearly, and writing them up. This helped me

compare findings and group them into four main themes. The four themes reflected the main objectives: depression and anxiety risk, weight stigma, bidirectional influences, and implications for care. Each theme was checked back against the original studies to make sure it reflected the data rather than my own assumptions. I also followed the ENTREQ framework (Tong et al., 2012), which guided my reporting to keep it open, careful, and as transparent as possible.

Ethical Considerations

Because I only used published, publicly available studies, I did not recruit participants or collect new data, so the risk of harm to anyone would appear to be low. No sensitive personal data were accessed at any point. I cited every source properly and respected the original authors' work to avoid plagiarism. I also followed the BHBIA (2020) ethical framework for secondary data, which helped me think about confidentiality, data protection, and fair use of information.

References

1. BHBIA (2020) *Ethical Guidelines for the Use of Secondary Data*. London: British Healthcare Business Intelligence Association.

2. Braun, V. and Clarke, V. (2021) 'One size fits all? What counts as quality practice in (reflexive) thematic analysis?', *Qualitative Research in Psychology*, 18(3), pp. 328–352.

3. Jones, R.A. et al. (2021) 'The impact of adult behavioural weight management interventions on mental health', *Obesity Reviews*, 22(4), e13150.

4. Luppino, F.S. et al. (2010) 'Overweight, obesity, and depression: a systematic review and meta-analysis of longitudinal studies', *Archives of General Psychiatry*, 67(3), pp. 220–229.

5. Malmir, H. et al. (2022) 'The bidirectional association between depression and obesity', *International Journal of Psychiatry in Clinical Practice*, 26(2), pp. 143–155.

6. Marmot, M. (2020) *Health Equity in England: The Marmot Review 10 Years On*. London: Institute of Health Equity.

7. Robinson, E., Sutin, A.R. and Daly, M. (2017) 'Perceived weight discrimination mediates the prospective relation between obesity and depressive symptoms', *Health Psychology*, 36(2), pp. 112–121.

8. Tong, A. et al. (2012) 'Enhancing Transparency in Reporting the Synthesis of Qualitative research: ENTREQ', *BMC Medical Research Methodology*, 12(1), p. 181.