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Hypervisibility meets hyperinvisibility: anti-fatness, moral panics, and mainstream U.S. news coverage of fat people taking Ozempic and Wegovy

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ABSTRACT

Following the explosion of interest in GLP-1s from 2021 onward, U.S. news media coverage has focused extensively on weight-loss drugs like Ozempic and Wegovy (known as GLP-1s). Nevertheless, little is known about how fat people are portrayed in news media coverage of weight-loss drugs. In this study, we conducted an ethnographic content analysis (ECA) of how fat people were represented in 749 news articles about GLP-1s in two major U.S. newspapers (*New York Times* and *USA Today*), looking at their coverage of both Ozempic and Wegovy from January 2023 through January 2025. We highlighted four major patterns in how fat people and weight-loss drugs were discussed in the mainstream news media: 1) Fat people were made invisible, particularly by not talking to fat people, treating fatness as monolithic, and prioritizing small fat over larger body sizes; 2) Weight-loss drugs were seen as an avenue to thinness and a mechanism for escape and rescue from fatness, just the actual amount of weight people typically lost was obscured; 3) Moral panics ensued about fat people as burdensome, mob-like, and undeserving of access to expensive weight-loss drugs; and 4) Sympathy with fat people and how insurance companies harmed fat people appeared. We explored the hypervisibility/hyperinvisibility implications for media coverage of weight-loss drugs and anti-fatness, the reinforcement of stigma and moral panics on conversations about GLP-1s, and the see-sawing between the "greedy" fat person and the greedy profit-driven pharmaceutical industry as problematic.

KEYWORDS

Weight-loss drugs; fatness; journalism; big pharma; healthism; moral panics; anti-fatness

Mainstream media often plays a major role in disseminating information about medications, describing what different medications can do, and framing information about who typically takes the drugs. Since 2021, there has been an explosion of media interest about weight-loss medications like Ozempic, Wegovy, and Mounjaro (collectively known as GLP-1s), leading to the intensification of the hypervisibile/hyperinvisible dialectic for fat people (Gailey 2023). These drugs, which assist with weight-loss by suppressing appetite, controlling glucose levels in the body, and mimicking the subjective conditions of feeling full, have been widely promoted in numerous media platforms, including news media, social media, informal forums like Reddit, medical forums, and through direct-to-consumer advertising. By now, most people in the U.S. have heard about, and seen advertisements for, GLP-1 weight-loss medications. People are flooded with information about weight-loss medications and other drugs, just as they receive numerous, and often conflicting, messages about fat people and fatness.

Many people turn to mainstream news media to access accurate information about medications like GLP-1s, particularly as more people have learned about these drugs either through formal or informal sources of information (e.g., doctors, friends, relatives, acquaintances, coworkers, and more). In tandem with this, media coverage of weight-loss drugs like Ozempic, Wegovy, and Mounjaro grew exponentially from 2018 to 2023, with particular surges happening in the U.S. from 2021 to 2023 (Han et al. 2024). A study of global interest in GLP-1s found that search interests rose after 2022 for weight-loss drugs, and that a single episode of Dr. Oz's television show coincided with strong peaks of interest in numerous countries (Raubenheimer, Myburgh, and Bhagavathula 2024). This again suggested a surge of hypervisiblity for weight-loss drugs without much coverage of fat people themselves (e.g., how they felt about the drugs).

Research has directly examined coverage of weight-loss medications in the mainstream news media. One quantitative study of 127 articles found that news articles focused primarily on the social and popular aspects of weight-loss medications, followed by basic medical information, harms of the medications, and

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benefits of the medications. Additional topics of interest were the cash price, lack of insurance coverage, and cost-effectiveness, particularly in print newspapers (Gionfriddo et al. 2025). Studies of messages about Ozempic on Reddit and TikTok found constant discussions of weight loss, the benefits of using Ozempic, dosaging, insurance denials, weight-loss tracking, and side effect management (Basch et al. 2023; Fong et al. 2024). A study comparing TikTok and WeightWatchers approaches to weight loss on Ozempic found that TikTok was far more likely to frame fatness as a disease, while Weight Watchers employed a variety of frames to explain the desire to lose weight (Lennon 2023).

Largely missing from these studies, however, was an analysis of how fatness and fat people were portrayed in news coverage of weight-loss drugs, a gap that this study sought to address. That said, studies have shown that mainstream news media is prone to biases of healthism, or the belief that health is a moral phenomenon and largely due to individual choices and responsibilities (Spratt 2023). Intensely negative coverage of fat people during the COVID-19 pandemic, for example, portrayed fat people as both unusually vulnerable to COVID and, often, deserving of negative outcomes because of their fatness (Fahs 2025). Media coverage of fatness also portrayed fat people with differing degrees of sympathy based on a variety of factors, including how much they could control their fatness, how hard they tried to lose weight, and whether fatness was a byproduct of biological or social conditions (Bias 2016).

People's reactions to mainstream media coverage of fatness has deeply affected how they see fat people. Most mainstream media coverage of fat people talked about their quest to lose weight and the necessity of their weight loss (Holland et al. 2015; Saguy and Gruys 2010). When fat people were seen in a positive light, a rarity, it was often because of "heroic" journeys related to weight-loss and rarely featured mundane depictions of fat people (Throsby 2015). On social media, too, thinner users often praised people's bodies for becoming thinner after engaging in exercise and fitness activities rather than praising bodies for just being as they are, implying that evolving into thinness garnered the most praise (Viberg 2023). Direct resistance to anti-fatness was perceived less positively by thinner people, as fat activism was often perceived negatively, with fat women activists particularly cast in negative terms (Oswald et al. 2025). In all, though, fat people were particularly subjected to the ongoing dialectic between being hypervisible (ubiquitous media coverage) and hyperinvisible (fat subjectivity largely disappeared from view) (Gailey 2014, 2023), a construct this study explored.

That said, challenges to negative media coverage of fat people continue to proliferate, including fat activist work that combats commonly-held stereotypes about weight loss (Gordon 2023). This work has attempted to undo some of the damage caused to fat people by anti-fat biases (Cooper 2021), reimagine body positivity and body neutrality (Pellizzer and Wade 2023), and more fully embrace fat fury as a tool of resistance (Fahs 2025). Allyship and alliances between fat and thin people, another theme often ignored in the media, may also be a way for people to challenge negative media portrayals of fat people (Przybylo and Fahs 2021).

Research questions

This study explored the depictions of fat people in the media in light of the recent surge of media interest in GLP-1 medications. Consequently, this study asked two key questions: First, how has the mainstream news media coverage of weight-loss drugs portrayed fat people? Second, what do these portrayals suggest about the visibility and invisibility of fat people, their social value, and the moral frameworks surrounding weight-loss drugs?

Method

In this study, we conducted a qualitative ethnographic content analysis of 749 news articles about two GLP-1 drugs – Wegovy an Ozempic – published between January 2023 and January 2025. We selected two major daily newspapers for our analysis: The *New York Times* and *USA Today*. The *New York Times* (NYT) has a national circulation, a dedicated health section, and is considered one of the most prestigious national newspapers in the U. S (Hamilton and Tworek 2023). *USA Today*, though known for less in-depth analysis of issues, was chosen because of its nation-leading circulation and its national audience. We searched for articles on LexisNexis Uni, an international digital archive of newspapers. The search terms focused on the drug names of Ozempic and Wegovy, the two brand names of GLP-1s most discussed and most well-known during this time period. (Also, even though "GLP-1s" are sometimes used, newspaper articles almost always couple this with the name of the

brand-name drug.) We ultimately selected 749 news articles to analyze, including 690 articles from the *New York Times* and 59 articles from *USA Today*. The discrepancy in the number of newspaper articles from each publication reflected the relative volume of articles that each newspaper publishes, as *USA Today* publishes a fraction of the articles that the *New York Times* does.

We excluded from our analysis articles that discussed findings from new research on GLP-1s without direct depictions of fat people, articles that only discussed side effects and physiological effects of weight-loss drugs as well as articles that only provided brief policy updates without any other context or information. We also excluded discussions of other weight-loss drugs (e.g., Mounjaro, Zepbound, etc.) in order to keep the analysis more specifically on the two drugs with the most visibility during this period of time. We also excluded other kinds of media from our analysis (e.g., social media, magazines, films, television news, etc.) because each type of media tends to have a different tone and style. Printed newspapers tend to present as more politically-neutral, more vetted, and less inflammatory and sensationalistic compared to other forms of media.

Because this was an exploratory study, we initially did not have standardized and prefabricated codes. Instead, we used ethnographic content analysis (ECA) because it is a flexible method that allows for "categories and variables [to] initially guide the study, but others are allowed and expected to emerge throughout the study, including an orientation toward constant discovery and constant comparison of relevant situations, settings, styles, images, meanings, and nuances" (Altheide and Schneider 1996, 16). We coded the responses based on the language and semantic content of the articles, looking specifically for patterns in how these drugs were discussed in these mainstream news outlets. Both of the coders had to agree that the article met criteria in order for them to be included in the analysis.

Both of the authors coded the data. We are both full professors at a major university in the Southwest, one in women and gender studies and one in sociology and social and cultural analysis. We approached this work with an explicitly feminist and fat justice orientation that fuses scholarship and activism. Our coding focused on descriptions of fat people and emphasized four key areas: policy reports (e.g., changes in coverage to insurance and Medicare/Medicaid) and their impact on fat people, health issues related to GLP-1s if the article discussed things beyond physiological changes to the body, public-facing issues related to GLP-1s (e.g., celebrity news, conversations about GLP-1s and social life, etc.), and opinion pieces (e.g., commentaries and op-eds about the drugs). These were selected in order to have the greatest opportunity to focus on the framing of fat *people* rather than focusing primarily on symptomology, side effects, or other non-human-focused aspects of weight-loss drugs. The coding process involved reviewing each article, determining whether inclusion criteria were met, and reviewing the content to assign to a theme or themes. As this was a qualitative study, these topics functioned as sensitizing concepts that guided the analysis to content, topics, or themes. The rest of the analysis held an emergent orientation that minimized predefined and rigid categories.

Results

Results showed four key patterns in how fat people were characterized in news accounts of weight-loss drugs: 1) Fat people were made invisible; 2) Weight-loss drugs as an avenue to thinness; 3) Moral panics about too many people using an expensive drug; and 4) Sympathy for fat people blocked from access to GLP-1s. These themes and their descriptions are outlined in Table 1.

Fat people were made invisible

A key pattern noted throughout the two newspapers was that medical professionals, politicians, and corporate spokespeople were called upon to characterize the meaning of, and reactions to, weight-loss drugs more than fat people themselves. This happened through three key trends: a) talking *about* fat people without talking *to* fat people as sources; b) treating fat people in monolithic ways (all fat people are alike); and c) erasing larger fat people and focusing on "small fat" body sizes without actually demarcating this, ultimately leading to a nearly full erasure of those above 300 pounds.

Talking about us without us

Both newspapers had a consistent tendency to talk *about* fat people without talking *to* fat people, rendering their voices invisible or usable only as an opening piece of anecdotal evidence. At least three-quarters of the articles we

Table 1. Four major patterns in media coverage of fat people and weight-loss drugs.

Pattern	Description of Category
1. Invisibility of Fat People	– Fat people rarely talked to or consulted – Fatness treated as a single, monolithic experience – Focus on small fat bodies instead of larger bodies
2. Weight-Loss Drugs as Escape Tools	– Collapsing health and thinness – Weight-loss drugs as rescue or escape – Equating thinness with happiness and good quality of life
3. Moral Panic and Stigmatization	– Fat people portrayed as burdensome to healthcare systems – Described as undeserving of access to expensive treatments – Panic about cost, scarcity, and social responsibility
4. Conditional Sympathy and Recognition of Sizeism	– Media sometimes highlighted insurance denial harms – Occasional acknowledgment of discrimination and sizeism – Sympathy often framed within the context of medical access

analyzed included commentaries, quotes, and opinions of medical doctors, celebrities, policy experts, thinner people taking weight-loss drugs to "lose a few extra pounds," and pharmaceutical representatives but did not include voices of fat people taking (or considering taking) weight-loss drugs. While some of the op-eds and commentary pieces featured fat people personally talking about how much these drugs had helped them to lose weight, these were rare compared to the number of articles that talked about fat people without ever speaking to fat people. For example, an April 30, 2024 NYT article posited, "When Barbra Streisand posted a comment on social media about the actress Melissa McCarthy, it prompted a public conversation," again showing the emphasis on celebrities taking Ozempic at the expense of a wider swath of fat people. A November 23, 2023 NYT article on Ozempic ("Some psychiatrists have started prescribing Ozempic") had the typical progression of content: an opening anecdote about a (small) fat person, lots of commentary by doctors and researchers, and a closing anecdote about a thinner woman who gained 20 pounds and was able to take off her baby weight with Ozempic.

Fat people as monolithic

As another way to ignore diversity among fat people, coverage of weight-loss drugs frequently talked about fat people as an amorphous and homogenous monolith where all fat people were the same, again rendering them both hypervisible and invisible. Terms like "fat people" or "people with obesity" were mostly treated as a singular group both in terms of body size and motivations. There was a flattening of complexity of the diverse reasons people sought out weight-loss drugs, with newspaper articles emphasizing desire to lose weight and, to a lesser degree, improve their overall health. Consideration of comorbidities and other medical conditions that these drugs could help, eating disordered problems, critical responses to celebrity and advertising culture, and the desire to lose weight before a major life event or pregnancy (among other topics) were largely left out of view. Instead, fat people were talked about in blanket ways without adding any specificity. For example, a February 1, 2024 *USA Today* article touted, "For decades, people with obesity have dreaded interacting with their health care providers," citing no specificity, degree of fatness, or diversity of fat experience in the article. Even age and class diversity was largely missing in most news articles, despite coverage repeatedly talked about the importance of weight-loss drugs being covered by Medicare and Medicaid.

Fatness as only "small fat."

As another way that fat people were made invisible in coverage of weight-loss drugs, almost no mainstream newspapers distinguished between different degrees of fatness. Though identifying a continuum of fatness is a common tendency in fat studies literatures and online fat communities – such as distinguishing "small fat" from "infinifat" (Fluffy Kitten Party 2021) or even mentioning that there were hugely diverse body sizes in the category called "fat" – this was overwhelmingly missing in mainstream news media coverage of weight-loss drugs. Reporters preferred to use terms like "obese," "overweight," or "plus-size" while the term "fat people" was mostly used when fat activists characterized aspects of fat oppression. For example, a July 9, 2024 *New York Times* article wrote, "Fat people don't need to have it reiterated yet again that it's everyone's worst nightmare to look like us." The lack of nuance and specificity was typical of nearly all coverage of weight-loss drugs. In particular, fat people who weighed over 300 pounds were almost entirely absent from news coverage of weight-loss drugs, while those between 250–300 were rarely depicted. Coverage focused overwhelmingly on people who had as their starting weight 140–250 pounds, and who lost between 20–40

pounds. (Notably, newspapers did include many people's starting and ending weights in coverage of weight-loss drugs, revealing the exact body sizes who are left out of view.)

Weight-loss drugs as an avenue to thinness

A second key pattern noted in mainstream newspaper articles was the tendency to frame weight-loss drugs as an avenue to both health and thinness, and to collapse these categories as singular and equated. This resulted in three tendencies: a) collapsing health and thinness; b) framing weight-loss drugs as both rescue and escape from fatness; c) equating thinness with happiness and good quality of life; and d) ignoring the amount of weight most people lost on weight-loss drugs.

Collapsing health and thinness

Over half of these newspaper articles suggested that health and thinness were discussed as one and the same, with weight-loss drugs being an avenue toward thinness *as* health and health *as* thinness. One October 14, 2024 *USA Today* article wrote, "'This medicine has been life changing for so many of us,' Martin says. 'I went from being morbidly obese to being in a healthy body weight. I was taking blood-pressure medication, and now I don't. I went from 222 pounds to 140 pounds.'" The lack of reflexivity about diverse body types being healthy was evident here. Newspapers also ignored some of the key tenets of body positivity or even longstanding programs that worked to expand notions of bodies and health like Health at Every Size, again suggesting that health *was* thinness and thinness *was* health in these articles. Further, there was a major return to the language of fatness as a disease. A September 19, 2024 *NYT* article quoted Oprah saying, "Obesity is a disease . . . It's a brain disease."

Weight-loss drugs as rescue and escape

In particular, these newspapers framed weight-loss drugs as a way to escape the annoyances of eating, or fatness altogether, using language of *rescue* and *escape* from both stigma and the fat body. This was particularly true for discussions of "food noise" and how fat people became free of it. One October 8, 2024 *NYT* article wrote, "People taking drugs like Ozempic say their appetites evaporate. The constant 'food noise' in their heads – wondering what they'll eat next, and when – goes quiet." Escape from fatness also appeared in coverage of public-facing celebrities taking weight-loss drugs or influencers promoting weight-loss drugs to their followers. Discussions of Adele, Rebel Wilson, Mindy Kaling, and Oprah becoming thin enough to avoid fat stigma were especially prominent in both *USA Today* and *NYT*. By situating weight-loss drugs as a "cure" for fat people's ailments, and by not teasing apart stigma and negative health consequences, weight-loss drugs were positioned as saving and rescuing people, or allowing them to flee the (assumed negativity of the) fat lifestyle.

Equating thinness with happiness and good quality of life

Aggressively healthist assumptions that thin people are healthier, happier, and having better quality of life also appeared in roughly a quarter of these mainstream news articles. A December 11, 2023 *NYT* article described a fat woman by saying, "She has lost 50 pounds and the shame that accompanied her weight is gone." A *USA Today* article from March 4, 2024 described another woman's weight-loss as leading to a better life: "'I didn't wanna show up at another party and see all of my friends 20 pounds thinner and just be resentful,' . . . After she lost nearly 30 pounds on the medication, [the woman who had lost weight] said she 'started to feel seen for the first time.'" Similarly, and as a complement to this, the beliefs that fatness equated with lack of health, unhappiness, and poorer quality of life were also pervasive, serving as a warning for those resistant to trying weight-loss drugs. An August 9, 2024 *NYT* article wrote, "doctors stress that obesity is a chronic disease and, like high blood pressure and other chronic diseases, must be treated for life." The lack of reflexivity about healthism (Spratt 2023) was also clear in these newspapers.

Ignoring the amount of weight most people lost on weight-loss drugs

Coverage of weight-loss drugs also overwhelmingly obscured the amount of weight most people lose when they take weight-loss drugs, again suggesting a kind of hyperinvisibility of actual fat bodies. Most fat people, especially those who are larger in size, only lose a maximum of ten percent of their body weight when taking weight-loss drugs, and often lose far less weight. For a 350-pound person, that would equate to a maximum of 35 pounds, meaning that even on weight-loss drugs, they would still be considered fat (Pawlowski 2023). Newspapers

overwhelmingly left this out of view, instead portraying a massive transformation from fatness to thinness, or from average-sized to excessively thin. One December 5, 2023 *USA Today* quoted celebrity Sharon Osbourne describing her Ozempic weight-loss where she went under 100 pounds: "I'm too gaunt and I can't put any weight on. I want to, because I feel I'm too skinny." Similarly, a November 19, 2024 *NYT* article on the transformation of people's taste buds while on weight-loss drugs wrote, "Kenney has lost more than 100 pounds. And it has been easy, she said, because the treatments have transformed her experience of flavor and mouthfeel." No coverage of the drugs emphasized that fat people will likely still be fat even when taking these drugs.

Moral panics about too many people using an expensive drug

As a third key pattern found in mainstream newspaper articles on weight-loss drugs, we found that many articles were tinged with moral panics about fat people using weight-loss drugs. This appeared in two key ways: a) fears of too many fat people overwhelming healthcare systems; and b) casting fat people as burdensome and undeserving of affordable access to these medications.

Fears of too many fat people overwhelming healthcare systems

We found at least a sizeable number of articles included commentaries about people being concerned about "mobs" of fat people bankrupting Medicare, taxing the healthcare system, and being a financial burden to their company/state/federal government/global health markets. Embedded in these assumptions were the notion that there are too many fat people, and that if they all got access to these drugs, entire systems would collapse (notably, though, presenting fatness as both hyperinvisible and hypervisible). One October 22, 2023 *NYT* article warned that fat people could bankrupt healthcare systems: "the drugs could add 50 percent to the country's health care spending." This had a particularly racialized, ageist, and classed tone in many of the stories, situating people of color, older people, and poorer people as particularly burdensome and problematic for wanting these (expensive) drugs. One April 30, 2024 *USA Today* article on North Carolina refusing to cover weight-loss drugs said, "[The employer] pays for health insurance for about 130 employees, many of whom are older and dealing with chronic medical conditions such as obesity, diabetes and heart disease. Some are likely eligible for Medicare, the federal health program for people 65 and older, but they choose to remain on their company's health insurance, Ivey said. Medicare-eligible employees can choose to stay on their workplace insurance plan, but doing so puts a strain on employers." The focus on burdensome fat people instead of the pharmaceutical companies who made these drugs far more expensive than necessary was also notable, even though a few did have coverage of the gap between how much weight-loss drugs cost to make versus the exorbitant price tags for them. An April 4, 2024 *NYT* headline touted, "This Is What a Miracle Drug Looks Like, and It Costs Only $5 to Make."

Fat people as burdensome and undeserving of affordable access to these medications

As another example of moral panics about fat people taking weight-loss drugs, threads of fat people as burdensome and undeserving of the drugs appeared in the coverage of weight-loss drugs, especially when coverage focused on "personal responsibility" and narratives about the "proper" way to lose weight. When Robert F. Kennedy, Jr. was poised to take office as health secretary, coverage of these negative opinions of GLP-1s became ubiquitous. One November 26, 2024 quoted Kennedy critiquing the GLP-1 pharmaceutical industry, saying they were "counting on selling it to Americans because we are so stupid and so addicted to drugs." Implications that weight-loss drugs were the "easy way out" and that fat people were lazy and did not try hard enough were also commonplace occurrences in newspaper coverage of weight-loss drugs. An October 9, 2023 *NYT* article wrote, "Subconsciously, consciously, politically, economically and culturally, obesity signals moral laxity."

Sympathy for fat people blocked from access to GLP-1s

As a final pattern, some articles espoused views that were more sympathetic with fat people struggling to gain access to weight-loss medications but who were blocked by income, insurance issues, or other access issues. This appeared in two ways: a) anger with pharmaceutical and insurance companies and sympathy with fat people who were denied access; and b) broader critiques of how anti-fatness drives the GLP-1 industry and its policies.

In these more sympathetic articles, fat people were situated as subjected to various institutional frameworks that ended up blocking their access to GLP-1 drugs, particularly the pharmaceutical industry. Three articles argued for expanded access to poorer people, older people, and people of color. An August 7, 2024 *USA Today* article wrote, "If only certain patient populations get access to these medications – those primarily with private insurance, more generous health plans – then there's a huge percentage of the U.S. population that isn't getting access to these medications." Two other articles argued against the outrageously high price tag for GLP-1 medications, particularly when they were priced above $1,000 per month. Three news articles quoted Senator Bernie Sanders arguing that these medications were far too expensive. A March 29, 2024 *USA Today* article quoted Sanders directing his critiques to the government and pharmaceutical industries rather than fat people themselves: "Ozempic has the potential to be a game changer in the diabetes and obesity epidemics in America . . . But, if we do not substantially reduce the price of this drug, millions who need it will be unable to afford it. Further, this outrageously high price has the potential to bankrupt Medicare, the American people and our entire health care system."

Additionally, several news articles included critiques of how anti-fatness was woven into the GLP-1 industry and its policies, particularly as it normalized anti-fatness and the dislike of fat people. An April 21, 2024 *NYT* article directly talked about the presence of anti-fat discrimination: "For fat activist Sole-Smith 'diet culture' has come to symbolize all the crushing expectations under which American women live." Similarly, a September 19, 2024 *NYT* article wrote, "In declaring a disease without nailing down what the disease is, the medical community left obesity open to debate among doctors, insurers and everyday people. This in turn left people with obesity vulnerable, their bodies subject to accusations and questioning, overtreatment, undertreatment and mistreatment." Finally, features on resistance and fighting back at times included body positivity specialists and activists talking about the dangers of GLP-1 culture. A February 14, 2024 *NYT* article quoted a fat activist saying, "They tend to talk about the ways in which weight bias prevents people from showing up for treatment, not the ways in which weight bias prevents people from getting treatment when they have shown up." These critiques were far less common than critiques of fat people, but they did appear in mainstream news media.

Discussion

This study pointed to some key biases and problems in the mainstream newspaper coverage of weight-loss drugs during the period of 2023–2025, suggesting that, in spite of an overwhelming deluge of content about these drugs appearing in these newspapers, fat people were still largely cast as invisible, sidelined, misrepresented, and morally evaluated in negative ways. The ongoing tension between hypervisibility and hyperinvisibility was especially evident in analyses of weight-loss drugs like Ozempic and Wegovy, as there was a plethora of information about the drugs without many efforts to humanize fat people or create fat interiority or fat subjectivity. In short, anti-fat biases and the normalizing of stigma about fat bodies infused a multitude of ways that fat people were portrayed and talked about in this media coverage. We were particularly struck with the ironic characterization of fat people as ubiquitous, overwhelming, and "everywhere, all the time" combined with the sense that they were also mostly invisible. The fact that newspapers talked about fat people without talking to them was notable, as this sidelined their own viewpoints and analysis, and ultimately worked to brutalize and put down fat people. Much as the "headless" fat person on television news media dehumanizes and degrades (Cooper 2007), the nameless, shapeless, dehumanized character of the *fat person taking weight-loss drugs* also left fat people largely voiceless. It seems that the age-old call from feminist, postcolonial, and intersectional theorists to not talk "about us without us" (McDonagh and Bateman 2012; Stewart 2017; Yarbrough 2020) has not been heeded by the mainstream news media, particularly when it comes to discussing fat people taking weight-loss drugs.

There was also much evidence that fat people are not a group treated with much nuance by mainstream news media, in that fat people were constructed both as monolithic and as unusually thin compared to the full range of fat bodies that actually exist. This makes sense if people consider that efforts to dehumanize also flatten out complexity about a group of people; people stop seeing fat people as unique, different from each other, diverse in body sizes and identities, and worthy of care. Instead, fat people were treated as singular and easily dismissible. As a byproduct of this flattening out of the complexity of fat diversity, people on the larger end of the spectrum were especially erased, with almost no coverage exploring fat bodies characterized in the fat studies world as "superfat" or "infinifat." This is especially troublesome given that larger fat bodies often face intensifying stigma and scrutiny, and are constructed as even less worthy of care and access compared to smaller fat bodies (Lee and Pausé 2016;

Nath 2019). By not paying attention to those who weighed over 250 pounds, news media essentially erases a key contingency of fat people who exist in significant numbers in the general U.S. population but who do not typically appear in celebrity/influencer cultures.

This study also suggests that mainstream news media generally continues to promote healthist assumptions that thinness and health are one and the same (Spratt 2023), and that fat people who take weight-loss drugs are being "rescued" from the poor-quality lifestyle of their fatness. This is problematic on multiple levels, including that it obscures the actual impacts of weight-loss drugs (approximately ten percent of body weight loss) and nearly completely erases the reality that *most people who take weight-loss drugs stay fat*. People must realize they are not actually dealing with a drug that erases fatness or gets rid of fatness, but one that makes fat people slightly less fat. Notions that GLP-1s eliminate fatness are significantly off-base, but this is partly driven by news coverage that consistently misrepresents what the drugs do and how much weight people will lose on them. Also, by equating thinness and health, it also disallows conversations that critique the moral framework of health and thinness, just as it obscures necessary dialogue about what might be *healthier* or how diverse body types – even if they remain fat – are still often quite healthy (Gordon 2023). Much of the progress of the fat liberation movement collapses when news media continues to equate thinness with health, and weight-loss drugs as an avenue toward both.

Additionally, the insistence on framing fat people in moral terms, seeing them as burdensome and greedy, and imagining them as bankrupting and collapsing entire systems if given access to weight-loss drugs is particularly problematic. There were messages that weight-loss drugs are the "easy way out," that fat people who want them should feel shame and embarrassment, and that there cannot be too many fat people who want them without *dire consequences to society at large*. This emphasis on the greedy, needy fat person instead of the outrageously overpriced and greedy pharmaceutical industry was notable on many levels: it puts the emphasis on the fat individual instead of the systems around fat people; it keeps attention away from profit-motive of the pharmaceutical industry, and it keeps the conversation on notions of "deservingness" instead of access. If fat people are debated about deserving (or not) weight-loss drugs, then notions of who is gatekeeping the drugs, why they are gatekeeping these drugs, and what it means to allow only certain groups to have access to them remains invisible.

The gatekeeping structures around weight-loss drugs are driven by these moral frameworks, enabled by the treatment of fat people as an unreasonable and demanding mob. Other drugs with huge health benefits, taken consistently over the lifespan, do not have nearly the same kinds of stigma (e.g., blood pressure drugs, insulin, statins, etc.) or price tags attached to them. Remember that weight-loss drugs cost less than USD $5.00 a month to produce, and they are selling for over $1,000 a month (Constantino 2024). Mainstream news media coverage seemed to imply that this was a problem of the *consumer who wants the drugs* rather than as a straight up pharmaceutical grift (with the exception of Senator Bernie Sanders). This study suggests that news media feeds the story of the morally bankrupt and burdensome fat person who, if given access to weight-loss drugs, will bankrupt Medicare and destroy the country. That these stories are now being reinforced by our existing health secretary, Robert F. Kennedy, Jr., only makes these messages more mainstream and more dominant than before.

That said, there were a few instances of understanding the structural aspects of sizeism through anger at pharmaceutical companies, distaste for the outrageously high cash price that these drugs garnered, and some elevation of fat activist voices and other critical voices in the mainstream media. News articles at times shifted from the "greedy fat person" stereotype to the "greedy pharmaceutical company," making space for solidarity around the hatred of the U.S. healthcare system and its exorbitant prices. Whether those voices will continue to be featured in mainstream news media remains to be seen, though we found it a hopeful sign that this had not been completely extinguished.

Limitation and future directions

Certain methodological decisions may have limited the findings of this study. First, we focused only on a content analysis of two major U.S. newspapers. Studies of a wider swath of media outlets, particularly social media, television news, magazines, and media targeting people from different ends of the political spectrum could prove useful in illuminating more about the diversity of representation of weight-loss drugs and fat people in the media. Analysis of media coverage in other countries could also prove illuminating. Second, a quantitative content

analysis could precisely elaborate the frequency of these themes. Third, future studies could also explore how depictions of fatness intersect with race and class on depictions of weight-loss drugs, as clear intersections exist between ideas of "deservingness" and social identities like race and class. More explicit analyses of gender could also be fruitful, as anti-fat stigma continues to disadvantage fat women in much more severe ways than it does for fat men (Fikkan and Rothblum 2012).

This study pointed to the ways news narratives challenge or reinforce the stigma that drives anti-fatness. We found a few cases of resistance to the narratives that fat people could be erased, that fatness and unhealth were linked, or that fatness was a moral burden on society. Until journalists make better efforts to challenge and undermine the anti-fatness contained in the media we routinely consume, society will continue to treat fat people and their health choices with disdain and contempt. Moreover, fat people will continue to struggle with the twin problems of hypervisibility and hyperinvisibility, being both everywhere/ubiquitous and also absent, particularly when considering the complexity of their lives and choices. Whether weight-loss drugs are the "answer" to fatness is a conversation for another time, but the immediate question should be: What does the conversation around fatness and GLP-1s say about the interplay between moral panics, misinformation, and the mining of old tropes about fatness, and how can we best combat these to create a more just world for fat people and for all bodies?

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