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Miscellaneous

Looking good and feeling better. Healthism in weight loss apps

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Abstract

Healthism is a discourse in which health is moralised, placing responsibility on individuals to maintain their health and, therefore, actively work towards it. Within this context, weight loss apps in app stores are presented as tools for users to achieve their desired state of health. Consequently, weight and fat are problematised, which can lead to stigmatising effects on overweight individuals. This study aims to analyse the descriptors used in 95 weight loss applications through thematic analysis. As their discourses have a clear persuasive intent, it is essential to identify their health-promoting components. The results have shown four ways in which this type of health discourse is perpetuated: (1) emphasising the use of body mass index as an indicator of health status; (2) attributing poor lifestyle habits to overweight individuals; (3) associating thinness with health and health with beauty; (4) equating thinness with wellbeing, wellbeing with happiness, and being overweight with unhappiness. Therefore, identifying these types of components is crucial for health professionals, app users, and developers to avoid perpetuating stereotypes related to weight and body size.

Keywords

Health communication, medicalization, neoliberalism, digitization, stereotypes.

1. Introduction

From the health discourse perspective, excess weight is considered a social problem in two senses. First, it is seen as a danger to both the health of the individual and to public health (Kwan & Graves, 2013; Saguy, 2013). Secondly, members of society have determined that excess weight, as a putative characteristic, is a problem in itself (Saguy, 2013, p. 25). In other words, it is assumed that weight is inherently problematic without questioning whether this assumption is justified.

The proposed solution to this "problematic" excess weight is its reduction. This solution is rationalised within the broader neoliberal contexts of our societies, where individuals are increasingly held responsible for their health (and associated problems), with body size and shape as primary indicators (Monaghan *et al*., 2010). One way to facilitate this is through the use of mobile applications (hereafter referred to as apps).

1.1. *Weight loss applications and body mediation*

Apps are a type of software designed to be easily installed and used on mobile devices, such as smartphones and tablets (Lupton, 2021). Among these apps, the most popular are digital wellness apps, which include features for weight loss, such as physical activity logs and diet or calorie counters. Fotopoulou and O'Riordan (2017) argue that, as in the case of traditional media and other cultural constructs, these apps mediate the body, prescribing what is normal and acceptable ("healthy weight") and promoting weight loss, through exercise and calorie restriction, as the ideal way to achieve it. According to these authors, by using these apps and monitoring their data, users gain peace of mind by feeling that they are being proactive in taking responsibility for their own health and wellbeing.

Therefore, studying the discourse used by these apps is key as they are part of new media (internet-based media) and play an important role in constructing and circulating how we interpret our bodies and the bodies of others (Raisborough, 2016), as well as legitimising and naturalising the relationships we have with our bodies and our health (Raisborough, 2016, p. 7).

The growing research interest in such apps has focused on their feasibility in clinical practice (Ghelani *et al*., 2020), their effect on users (Chew, Koh, Ng & Tan, 2022), their usability design (Martin-Vicario, Bustos Díaz, Martínez-Sánchez *et al*., 2023), and their content and features (Zaidan & Roehrer, 2016). Arguably, the literature has concentrated on the analysis of apps once they have been downloaded. But there has been little analysis of the information that the potential app user receives prior to downloading, i.e. what images or text make up the app's presentation in the app stores.

The persuasive component of a presentation is key to users' decision to download the app (Kanthawala *et al*., 2019). Among the few studies that exist on this topic, Lupton (2021) focused on the promising narratives of food-related apps (e.g., nutrition, recipes). She found that those focused on weight loss promised greater weight control and awareness, leading to greater wellbeing and improved health. Similarly, Martin-Vicario, Bustos Díaz and Nicolas-Sans (2023) found that these narratives placed more emphasis on successful weight loss itself than on achieving it in a healthy and safe way or developing healthy habits. These aspects were considered secondary. Finally, the study by Kanthawala *et al*. (2019) investigated how users assessed the credibility and quality of weight loss apps by considering their presentation in app stores, both in terms of their ranking and the heuristic cues within them.

It should be noted also that despite the good intentions behind health promotion and weight loss discourses, there is a concern that the messages they disseminate (e.g., fat is problematic, weight should be controlled) may ultimately become unquestionable dogmas. These discourses encourage people to monitor themselves in a process of endless self-surveillance in order to conform to a socially acceptable body appearance (Germov &

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Williams, 1996). Moreover, when considering that 99% of weight loss apps are commercially driven (Nikolaou & Lean, 2017) and that their discourse can be influenced by commercial and partisan interests (Lynn *et al*., 2020), it becomes clear how their neoliberal and healthist approach is shaped, as well as the importance of the discourse used in their presentations.

Therefore, the aim of this paper is to analyse the presentation of weight loss apps in app stores to identify the elements that may reinforce the perpetuation of excess weight as a problem.

This article is structured as follows. The first section provides an introduction to the paper. The second section develops the theoretical framework, discussing the concept of health, medicalisation, and discourses around weight. The third section outlines the methodological framework, explaining the analysis sample and the process of analysis. The fourth section presents the results of the analysis. Finally, the fifth section contextualises the results within the literature, addresses the limitations of the study, and suggests future lines of research.

2. Theoretical framework

Discourses, understood from a sociological perspective, are a relatively consistent set of ideas that people use to interpret and make sense of the world around them and their experiences (Beltrán-Carrillo *et al*., 2018). In fact, there are discourses that are so internalised that they become invisible and, therefore, are not questioned (Cheek, 2004). As mentioned above, one such example is the hegemonic health discourse in which excess weight is problematised.

2.1. *Health as a social concept and process*

Saltonstall (1993) noted that health was a lived experience of people who were socially and historically contextualised. This experience involves a series of simultaneous communication processes on the part of the individual, enabling them to interpret both their own body and that of others as a "healthy person." In her study, she observed that interviewees defined health as a state of physical, mental, and emotional wellbeing. In other words, health was no longer just the absence of illness but had become synonymous with a state of life in itself. Similarly, she also noted that the body (size and shape) plays a significant role in the perception of health, both for oneself and for others.

In this way, the appearance of the body becomes an indication of health or lack thereof. Personal health becomes the main focus of attention in order to achieve wellbeing, and this is mainly achieved through the modification of lifestyle habits (Crawford, 1980). Consequently, health and illness are situated ultimately at an individual level. This logic, which Crawford (1980) termed as "healthism," morally obliges people to be healthy and therefore, to actively work towards it. Moreover, within this discourse, the body takes on a metaphorical function, with its appearance becoming the central indicator of fitness and health (Beltrán-Carrillo *et al*., 2018). Some authors (e.g., Monaghan *et al*., 2010) relate this phenomenon to body capital, where the appearance of the body becomes a passport to a good life.

2.2. *Health, aesthetics and lifestyle*

In healthist discourses, concepts of health and beauty are intertwined and inscribed with gender norms, acting as a kind of biopedagogy on the practices and appearance of male and female bodies. The body is regulated through a language of "choice," empowerment and health, in order to transform it into a disciplined and normative one (Camacho-Miñano *et al*., 2022). Health is no longer just a personal concern but has become the standard by which social behaviours and phenomena are increasingly judged (Crawford, 1980). Thus, health-consciousness has both a social and an individual dimension: there is a social incentive for

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the individual to take responsibility for the health of their body by implementing a series of preventive measures aimed at achieving so (Evans, Davies & Wright, 2004).

Healthism, moreover, establishes a relationship between health –derived from body shape and size– and physical attractiveness. The current model of beauty is linked to the "healthy" appearance of the body, i.e., its shape and size. Thus, those bodies that do not conform to this norm and are considered to be worthless and unhealthy are pressured to adhere to these ideal models (Beltrán-Carrillo *et al*., 2023). However, it should be noted that the gender variable influences the construction of this ideal model, and failure to meet it is considered a failure of femininity or masculinity (Fahs, 2015). Traditionally, the female body was expected to be slim, while the male body was expected to be muscular. Today, increasingly, the trend is towards lean and firm bodies (Atherton, 2021; Beltrán-Carrillo *et al*., 2023).

As a result, health discourses, especially those related to the body, tend to mask other motivations, such as aesthetics (Lynn *et al*., 2020). The diet industry often employs terms and concepts related to health in its discourse to promote aesthetic practices. An example of this would be weight loss companies. These have shifted from a rhetoric of "dieting" to one of "making lifestyle/habit choices," in which weight loss is positioned as a side effect of adopting a healthier lifestyle (Morris, 2019). This aesthetic motivation is particularly important considering Kwan's (2009) observation that, in their everyday lives, people tend to conflate beauty with health. Additionally, aesthetic discourses sometimes borrow terms from the health discourse to promote their perspective: being overweight is unhealthy and being unhealthy is unattractive. In fact, this author noted how aesthetics serve as a motivation to achieve health goals. The interviewees in her study admitted that their primary goal was to be thin, although they acknowledged that this could provide health benefits. Along these lines, Morris (2019) observed that people who underwent a weight loss programme did not necessarily do so with the aim of becoming thinner, but that it helped them feel more comfortable and confident in their bodies.

2.3. *The medicalisation of weight and fat*

In parallel, we observe the process of medicalisation of our everyday experiences. We are encouraged to conceptualise our lives, experiences and feelings in medical terms (Barker, 2014, cited in Raisborough, 2016, p. 45), subordinating behaviours and attitudes to the health-illness binary (Crawford, 1980).

This is partly due to what is known as the weight-centred health paradigm (WCHP), in which weight is the key indicator of health status (O'Hara & Taylor, 2018). This paradigm considers excess weight as a public health problem, classifying it as both a risk factor and a disease in its own right (Saguy, 2013). In this way, weight becomes an indicator of morality and self-control. From a neoliberal approach, maintaining a healthy body is tantamount to demonstrating personal success, while excess weight is seen as an individual failure (Kwan & Graves, 2013).

Kwan and Graves (2013) argue that this belief in excess weight as a problem at both societal and individual levels can be seen as a form of biopower. That is, control is exercised not through threatening the extinction of the body, but through the protection of life and the regulation of bodies (Kwan & Graves, 2013). This control, in addition to being exercised through biopower, is also exercised through biopedagogies. These play an important role in how people understand and comprehend their own bodies, teaching what is socially acceptable and the practices to achieve it (Camacho-Miñano *et al*., 2022; Rich & Lupton, 2022).

As Crawford (1980, p. 356) points out, health becomes "a super value, a metaphor for all that is good in life." This "all that is good in life" encompasses concepts such as happiness, sense of purpose, and self-esteem. Therefore, according to neoliberal currents, excess

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weight is regarded as a social problem, because it threatens the subscribed values of health, longevity and productivity. Within this consumer society, the body is also a recipient of consumption (Beltrán-Carrillo & Devís-Devís, 2019) so, in order to respond to the problem of excess weight, the market offers a series of strategies, products, and preventive services to improve the body (Beltrán-Carrillo & Devís-Devís, 2019; Raisborough, 2016).

2.4. *Measuring who is at an acceptable weight and who is overweight*

One of the most popular indicators for classifying people as overweight or obese is the body mass index (BMI). BMI takes into consideration a person's height and weight and is calculated using the following formula: BMI = kg/m^2. Although it has been widely criticised (e.g., Burkhauser & Cawley, 2008; Gutin, 2018), supranational organisations such as the World Health Organisation (WHO) continue to recommend it because of its ease of calculation and convenience, as it is available to everyone without the need for equipment or devices.

By this logic, BMI is allegedly able to classify and distinguish those bodies that have a higher risk (potentially problematic) from those that have a lower risk (less problematic) (Kwan & Graves, 2013). In this sense, BMI becomes a tool of biopower, operating through the notion of risk. Thus, people who fail to maintain an acceptable weight (BMI between 18.5 and 25 kg/m^2) put their health at risk and become morally suspect of being lazy, gluttonous and weak-willed (Kwan & Graves, 2013). Conversely, maintaining an acceptable weight and a healthy body are signs of character quality and personal success, demonstrating an individual's ability to exert control over their own body (Lupton, 2017).

This fear of excess weight has led many people –mainly women, but increasingly also men– to submit to constant practices of micro-control in which weight loss is equated with health (Raisborough, 2016). In this neoliberal logic, it is not only bodies with higher BMIs that are deemed at risk, but also those considered healthy (not overweight), which are perceived as asymptomatic or pre-symptomatic, since they may be at risk of gaining weight and thus facing the associated consequences (Kwan & Graves, 2013; Raisborough; 2016).

3. Methodology

3.1. *Sample and data collection process*

This study takes a qualitative approach to the analysis of the presentation pages of weight loss apps in app stores. To this end, both the text descriptors and the audiovisual content (images and videos) were considered. The interest in this type of text, as mentioned above, lies in its role as the first impact that users encounter before downloading the app, along with the persuasive nature of its content. It was decided to focus the study on apps appearing on Google Play, the app store for Android operating systems, due to its status as the largest app marketplace (Appfigures & VentureBeat, 2021), and because Android is the operating system with the highest penetration in Europe (StatCounter, 2022).

In the app search strategy, the process a user would follow to find such apps was emulated. To do so, in April 2023, the keywords "lose weight" were entered into the Google Play search bar using a mobile device. This search yielded 250 apps, either organically positioned or promoted within the ranking, which could potentially be analysed. As Dogruel, Joeckel and Bowman (2015) note, despite the vast number of apps, users consider both the number of downloads and their ratings before downloading. Therefore, from the initial number of apps, those with a score of less than 4 out of 5 points and with fewer than 1 million downloads were excluded, leaving a total of 95 apps.

From this final selection, the name, store description, rating, number of downloads, and version of the application were collected manually. Additionally, the hyperlink to the application was gathered in order to analyse the images and audiovisual content.

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3.2. *Analysis process*

For this study, a thematic analysis was conducted, as it allows for the identification of both the latent and the manifest (Neuendorf, 2018), thus enabling the identification of patterns of meaning in the text. In the case of the audiovisual elements, the analysis was grounded in the semiotic analysis explained by Rose (2001).

To perform the analysis, the steps indicated by authors such as Neuendorf (2018) were followed. Prior to the analysis, as suggested by Campbell *et al*. (2021), the coders (the author and a graduate student) engaged in a reflective process to consider possible biases that could influence the analysis of the sample. Once this was done, they proceeded to familiarise themselves with the sample to identify items that could potentially be of interest and to start identifying patterns in the images and recurring themes in the texts according to the objectives. As a result of this first reading, multiple themes were identified; however, due to word count limitations, this article focuses on those that promote the ideology of healthism. Utilising a theory-based approach, previous literature on this topic was used as a guide to establish relationships between the themes found and to identify the components that reinforced the discourse of healthism. This process was hand-coded without the use of specific software.

From this point on, an iterative process was undertaken in which the themes and their adequacy to answer the initial research question were reviewed: those components of the healthist discourse that perpetuate the problematization of weight. Once this step was completed, the coders proceeded to define and label the themes identified.

To ensure greater rigour in the sample analysis and the reliability of the themes identified, each step involved a process of discussion among the coders, similar to that proposed by Campbell *et al*. (2021). In this manner, the coders conducted an initial analysis of the sample independently, identifying the codes. After pooling the codes, there was a discussion about how they could address the initial question. For the initial generation of themes, the same process was employed. The key elements identified from each of the units of analysis were pooled, and from this, the initial themes were established.

4. Results

The analysis of the contents from the app stores, both text and images, reveals the presence of elements that could contribute to reinforcing healthist discourses in which excess weight is equated with a health problem and an impediment to the wellbeing and happiness of the individual. This section is structured around the four axes detected in the analysis of the sample units.

4.1. *BMI as a marker for health*

Health appears as an achievement that can be pursued through weight loss and fitness. To this end, the main indicator used in the app descriptors is BMI, despite the numerous criticisms of this index (e.g., Gutin, 2018). For example, in the units analysed, when displaying images of the data dashboard –the data summary page– the vast majority focus only on the calculation of BMI. In addition, although apps generally associate health with wellbeing, some apps link a high BMI with "serious health problems," such as app 15: "Am I obese? Obesity occurs when a person's body mass index is 30 or more. Excess body fat increases the risk of serious health problems."

This is particularly the case with app 15 which, in addition to equating BMI with excess fat and subsequently health problems, can also be seen to use the label "obese" to refer to a person, reducing a person to their relationship to weight alone. As identified by Puhl *et al*. (2013), this is one of the terms that people who are categorised as obese find most stigmatising.

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In this sense, the apps analysed assume that a high weight or BMI is directly equivalent to poor health. This is evident in the use of a traffic light system to indicate BMI. As illustrated in Figures 1 and 2, a higher BMI corresponds to a red light (indicating something bad or forbidden), while a lower BMI results in a green light (indicating acceptable or good). Therefore, individuals with a high BMI are placed in dangerous territory (red). Interestingly, lower BMIs (BMI <18.4 kg/m²), classified as underweight, are represented in blue. The use of the red colour serves to magnify the dangerousness and incorrectness of a high BMI, while an excessively low BMI, which also carries health risks, is downplayed with a more neutral blue. This aligns with what Saguy (2013) indicated: that individuals who are overweight are often judged more harshly than those who are underweight.

Figure 1. Traffic light system for BMI used by applications.

Source: Lose Weight - Weight Loss App.

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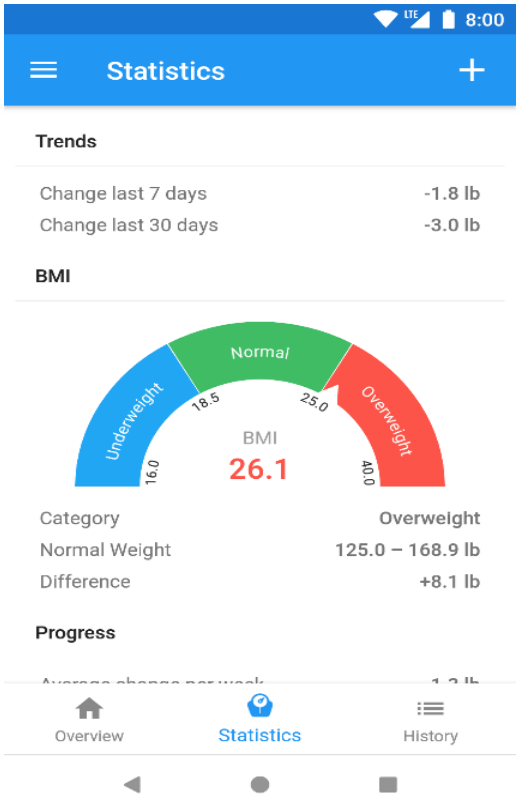
Figure 2. Variation of the traffic light system for IMC used by the applications.



Source: Lose Weight - Weight Loss App.

4.2. *Healthist discourse as a promoter of weight bias*

The descriptors of the apps suggest that individuals with higher BMIs do not have good health habits. This can be seen in expressions such as "Take control of your health" (app 225). By using this expression, the idea of taking back control, in this case, of one's health, is conveyed. In addition to assuming that excess weight is unhealthy, it also reinforces the idea that the person has been undisciplined and therefore their health is not under their control. This concept is also repeated in other apps, such as app 65, which "is designed for people who care about their health and want to lose weight and get fit." This kind of statement assumes that only people who want to lose weight are the ones who care about their health. In the same way, again, a causal relationship is established between weight loss and improved health, without explaining why this relationship exists. An example of this would be app 39, "Be stronger, leaner, healthier with [your] home workouts and [your] diet planner."

When health is mentioned in app descriptors, it is usually taken to mean wellbeing or being healthy. There are exceptions, such as in the case of app 79, where the disease component is noted, "reach your target weight because overweight and obesity are risk factors for diseases such as hypertension, heart disease and diabetes," and app 7:

> Belly fat covers the abdominals and is detrimental to health. It can increase risk of high blood pressure, cancer and other diseases. Experts say aerobic exercise helps burn calories and boost your metabolism. Try this app's aerobic exercises to get rid of that pesky belly fat and improve your health.

However, this wellbeing is linked to the user's ability to be in control and know how to make healthier choices. For example, app 52 states "we've made it easier to track food so you can make healthier choices for your mind and body." Such statements may reinforce the idea

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that the individual is not making healthy choices because of a lack of willpower or discipline, as the app facilitates the creation of these practices that will help them "make healthier choices."

Similarly, it has also been observed that a relationship is assumed between weight and body size and shape with certain "unhealthy" lifestyles and actions. For example, app 29 urges users to "Start developing a healthy lifestyle [...]! Drink the right amount of water, refuse junk food, eat more healthy diets and take more walks...".

4.3. *Use of health language in aesthetic rhetoric.*

The idea that health has an external component (appearance) has been observed, acting as a cue for others to interpret that body as healthy, "Keep your body healthy and make a wonderful flat stomach in a few weeks" (app 117). The app helps to maintain a healthy body and achieve a flat stomach –that is, with no fat– which is an indicator for others to interpret that body as acceptable.

Similarly, this idea of body maintenance appears in app 195, which states having "[fitness exercises] [...] aimed at losing weight and maintaining an excellent and pleasing body." In this way, weight loss is what helps to have an excellent body (internal maintenance) as well as a visually pleasant –that is, aesthetic– one (external maintenance). In other words, if you lose weight, you will attain an excellent body –functional, to contribute to society– as well as one that is pleasant –and beautiful to others.

Finally, in the example of app 117, it tentatively targeted certain areas (e.g., stomach) where fat is undesirable and is perceived as preventing the body from being healthy. Similarly, in the above example of app 7, it encourages the user to try the app to "get rid [of] that pesky belly fat and improve [the] health." In this case, they already categorise fat as annoying and something to get rid of, thereby improving health. However, the first idea that appears is that of discomfort, not health.

This idea can also be seen more clearly in app 22, which urges you to "[Exercise] to get rid of unhealthy weight and burn fat in beloved areas such as the waist, bat wings, thighs and ankles." Not only is there the idea that weight is unhealthy, but also the suggestion that one should get rid of it because it is unsightly. Thus, the idea of "getting rid of unhealthy weight" is used, but it is really urged for aesthetic reasons, to reduce size in "loved areas."

4.4. *Apps as aids to improve the body and quality of life*

Apps are positioned as helping users to achieve greater wellbeing. This can be seen in examples such as app 52, which urges users to "Prioritise your wellbeing with [our] innovative technology," which assumes that the user has so far, through ignorance or helplessness, not prioritised their health and is therefore viewed as unfit or overweight. Similarly, app 3, promises to help "Build a solid foundation for positive change" in users' lives. This change is linked to physical activity (what you do, or don't do) and body shape and size (through weight loss).

Occasionally, it has been observed that this approach to health improvement goes hand in hand with the concept of happiness. One of the clearest examples is the use of images that act as testimonials, more commonly known as "before and after." In these, the images depicting the before appear with a sad or neutral expression. As can be seen in Figure 3, the image is anchored with the text "100M+ happy users" implying that it is due to having lost weight and being fit that the person achieves happiness and therefore, those who have not become fitter, are implied to be unhappy. Another instance where we can observe this is in the descriptors of some apps that promise, "Soon you will get even better!" (app 20).

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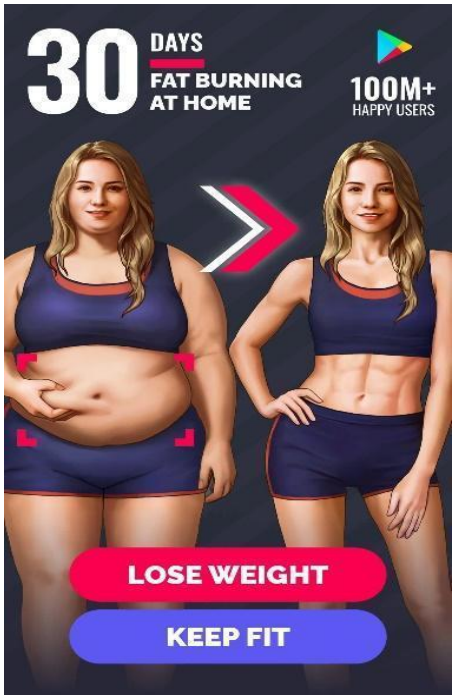
Figure 3. "Before and after" image with the caption "100+ happy users."



Source: Lose Weight App for Women.

Finally, an interesting example of the links established between weight loss and improved wellbeing of users is app 26: "start [...] now and, after 30 days, you may not only [improve] your physical conditions, but also change your emotional and intellectual conditions" (app 26). In this case, not only the physical-emotional health binomial (*mens sana in corpore sano*) is improved, but even intellectual enhancements are promised.

5. Discussion

This study has focused on the perpetuation of healthist logic (which links weight loss to health and health to happiness) in the discourse of the presentations of weight loss apps. To this end, the presentations of these apps in app stores have been selected as the unit of analysis, as they employ a discourse with clear persuasive intentions.

The first observation is that BMI, despite criticisms such as its failure to account for body composition (e.g., muscle mass, skeletal mass, water, etc.) (Burkhauser & Cawley, 2008; Gutin, 2018), remains the most popular indicator used to classify individuals' health status. It is frequently employed as an indicator of health without considering other, more significant biological markers. This reliance on BMI can be explained by two factors. Firstly, in health discourse, body measurements are viewed as health indicators to ascertain whether an individual possesses a slim –and therefore healthy– body (Beltrán-Carrillo *et al*., 2023). Secondly, in market societies characterised by materialism (Beltrán-Carrillo & Devís-Devís, 2019), health tends to be reduced to a superficial interpretation of body shape, as it represents the most material and tangible dimension of individuals.

Within this context, the apps can be seen as forms of biopedagogy, in that they teach how bodies should self-regulate according to socially established norms of health and beauty. This can be seen in the descriptors through the emphasis on BMI as an indicator of health and the setting of weight loss goals, which encourages self-regulation and control.

Furthermore, it has been observed that the use of visual resources, particularly colour, generates a sense of urgency and panic among individuals with higher BMIs. Previous literature (Ringel & Ditto, 2019; Rose Spratt, 2023) highlights this phenomenon, in which a

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moral panic is created surrounding excess weight. In contrast, being underweight, despite also being linked to negative health effects (e.g., Fricke & Voderholzer, 2023), is often ignored or presented as a state that is not taken into account. As Raisborough (2016) pointed out, a double standard exists in the judgement of individuals with higher BMIs compared to those with lower BMIs. This author noted that, generally, overweight individuals tend to be judged more harshly, as their body condition is attributed to negligence, placing the responsibility for change squarely on them. Conversely, individuals who are underweight –often associated with eating disorders– tend to elicit more empathy and sympathy, as their condition is viewed as a social issue requiring a collective response.

In line with Beltrán-Carrillo and Devís-Devís (2019), the use of colour schemes establishes a system of rewards and sanctions (green when in a "good" state, red when in a "bad" state), which can generate a sense of competitiveness and pressure to meet the established standards. As asserted by Beltrán-Carrillo *et al*. (2023), this emphasis on body measurements, particularly in the form of BMI monitoring, creates an ideal context for individuals to feel pressured to control and regulate themselves. Ultimately, users are educated to monitor and modify their behaviour to align with ideal body standards. In this way, the idea that prioritises slenderness –being slim and toned– and physical control as synonymous with health and success is perpetuated.

Another aspect that has been identified in the analysis is that apps reduce the solution for a complex situation (i.e., overweight and obesity) to a simple modification of health habits (Raisborough, 2016) that can be achieved through their application. This solution is proposed because it is assumed that overweight people are overweight because they have an unhealthy lifestyle that has led them to this state. This result is interesting because Martin-Vicario, Bustos Díaz and Nicolas-Sans (2023) observed that in the descriptors of the apps they all promoted weight loss, while habit change hardly appeared. In contrast, in this paper's analysis, behaviour change was found to be a prominent factor.

Behaviour change is expressed in terms of taking control of health. This aligns with previous literature, in which health is conceived as fluctuating–that is, one may be healthy today but not tomorrow–and consequently must be maintained or controlled (Saltonstall, 1993). Those who fail to do so, within this logic, are deemed either lazy or lacking in discipline. Consequently, it is assumed that they have not made the right choices and must now regain control (Kwan & Graves, 2013; Saguy, 2013). In accordance with Germov and Williams (1996), users, through this app solution, possess an 'assumed' freedom to choose whether or not they wish to be healthy. This is consistent with neoliberal discourses in which, through a language of choice and empowerment, the illusion that everyone can achieve their destiny is offered (Camacho-Miñano *et al*., 2022). In this context, that destiny would be the ideal body.

However, the discourse of most descriptors in these apps does not seem to be designed for an audience in need of significant weight loss, but rather for individuals who are slightly overweight and/or at a weight considered acceptable. Monaghan, Hollands and Pritchard (2010) identified a type of actor within obesity discourses that moralises fatness and disseminates concerns about it (e.g., not being desirable to others), affecting individuals who may or may not identify as obese or overweight but who are held accountable for correcting that perceived mistake. For their part, users will seek to rectify what they perceive as being overweight, regardless of whether it corresponds to categories defined by indicators such as BMI (Monaghan, Hollands & Pritchard, 2010).

Related to the above, another interesting aspect to note is that, with few exceptions, the apps, while assuming that excess weight is unhealthy, do not specifically mention the 'supposed' health problems associated with it. Additionally, when it comes to mentioning the benefits, these are usually framed in aesthetic terms. In fact, the idea that a slimmer

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body is a healthier body and, therefore, more desirable to others is reinforced. This aligns with previous literature, in which aesthetic discourse has co-opted the language of the health field (Kwan & Graves, 2013), suggesting that having a slimmer body –and thus being regarded as more "pleasant"– represents a passport to a better life (Beltrán-Carrillo *et al*., 2023; Monaghan, Hollands & Pritchard, 2010).

Following this notion of a better life, another of the axes observed in the article is the concept of wellbeing and happiness, confirming what Kwan and Graves (2013) asserted. Within the framework of neoliberalism and the culture of consumerism, persuasive media discourses have established an association between youth, beauty, and fitness as goals to be achieved. Conversely, excess weight leads to a diminished quality of life by causing individuals to "not look good" and not "feel good" (the external and internal maintenance components proposed by Saltonstall (1993), respectively). Consequently, they are deemed undesirable to others. In other words, thinness equates to happiness, while excess weight leads to a path of unhappiness. This has been observed both in the form and expression of the "before and after" images, as well as explicitly in the texts. Within this context, the descriptors promote the use of apps as aids in achieving an ideal body, fostering the idea that access to a better life is the result of the choice and purchase of specific products, in this case, the app in question.

This paper contributes to the current literature on the study of weight discourses by providing a qualitative analysis of a previously unexamined communication medium: weight loss apps. It has been observed that these apps tend to perpetuate a discourse anchored in healthism, which, as indicated in previous literature (e.g., Jiménez-Losaia *et al*., 2020; Sturtz-Sreetharan, Trainer & Brewis, 2022), can lead to the stigmatisation of excess weight and, consequently, individuals who are overweight. The analysis demonstrated that (excess) weight is perceived as problematic and there is a tendency to alarm individuals regarding being overweight. Similarly, the notion of personal responsibility concerning weight issues is reinforced, such that it is the individual who must and can –through the application– remedy this excess weight. Finally, the analogy that a slim body serves as a passport to a better life, both in terms of wellbeing and happiness, is further reinforced.

5.1. *Limitations and future lines of research*

This study has a specific scope and is not without limitations. The first is that it has been focused on the analysis of the descriptors used in the presentations of commercial apps that could be found in the app store. Therefore, it might also be interesting to see if the same results can be observed in apps developed by scientific entities. Similarly, the focus of the study has been on the persuasive content of the discourse in the app store presentation, so future studies could look at whether the internal content of the app itself also uses the same type of discourse or whether it is something that has only been used in the descriptor in the store. Related to this point, the study has focused on the analysis of app texts, but it would also be interesting to analyse it from a reception studies perspective, in line with studies such as those by Camacho-Miñano, MacIsaac and Rich (2019) and Rich and Lupton (2022). Finally, despite having taken the necessary measures, the sample analysed is the result of the search process in the app store. Due to the way the algorithms work, it is possible that other results of interest did not appear for analysis. Therefore, future studies could use other types of search strategies when selecting the study sample.

6. Conclusions

This article shows how the descriptors of weight loss apps available in the Google Play app store perpetuate the health discourse. This occurs primarily through four dimensions. First, through the use of the body mass index, which is used as an indicator of health, reinforcing a materialistic and superficial view of health by taking into account only the most tangible

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and observable variables of the body (shape). Secondly, through the perpetuation of the prejudice that overweight people have bad lifestyle habits. Generally, this prejudice is linked to the belief that weight is controllable, malleable, and therefore the person has to work to achieve an "ideal" weight. In this case, apps are presented as part of a wider range of goods and services that can help improve one's life. The third dimension relates to the reinforcement of the idea that to be thin is to be healthy, and to be healthy is to be beautiful. Finally, the fourth dimension reinforces the belief that thinness leads to wellbeing and happiness, while excess weight leads to unhappiness. The consequences of applying these four dimensions allow us to observe a broader pattern in which the ideals of health and beauty are not only intimately intertwined, but also deeply commercialised and simplified. This is the first work to study this phenomenon in weight loss apps, opening avenues for future research in the context of mobile apps and how they articulate their discourse around weight, health and aesthetics.

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