Let’s Talk about Weight Bias Attitudes among Future Health Professionals

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Methods

• Study Population: college students ages 18-59 who were attending classes full or part time.
• Study Design: A cross-sectional Design.
• Measurements:
  1. Demographic questions including gender, age, BMI, college major and career plan, and dieting behaviors,
  2. The Photographic Figure Rating Scale (Swami, Salem, Furnham, & Tovee, 2008), and
  3. The Anti-fat Attitudes Questionnaire (Crandall, 1994).
• Study Procedures: college students were recruited for participation through emails from their instructors, the university canvas system, in-class announcements, and social media. $10 gift cards were sent to 20 selected participants.
• Data Analysis: Paired samples t-tests & independent t-tests.

Introduction

• Weight bias has been linked to the current obesity epidemic (Forhan & Salas, 2013)
• A study of 389 health professionals specializing in obesity found that significant implicit and explicit anti-fat attitudes were present throughout the population (Carels et al., 2014).
• Physicians tend to be more rushed, less thorough, and share few resources with their patients who are overweight and obese (Forhan & Salas, 2013).
• Weight bias attitudes among healthcare providers towards patients who are overweight or obese have impaired patient’s desire to seek medical care (Tomiyama et al., 2013).
• Individual’s body dissatisfaction has been associated with adverse health impacts (Pearl & Phul, 2016).

Results & Conclusions

Demographic Information:
• Gender – 59 males, 133 females
• Race/Ethnicity – White (86.4%), Hispanic (5.2%)
• Marital Status – Single (60.4%), Married (37.5%)
• Career Path – Patient Care (39.6%), Teaching (31.8%), Community Health (6.8%), Social Work (4.2%)

Mean Comparison (paired samples t-tests) of the PFRS with & without the BMI chart:

<table>
<thead>
<tr>
<th>PFRS</th>
<th>W/O BMI M (SD)</th>
<th>W/BMI M (SD)</th>
<th>t</th>
<th>DF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Which figure best represents a healthy figure?</td>
<td>4.65 (1.01)</td>
<td>4.35 (1.77)</td>
<td>4.67***</td>
<td>190</td>
</tr>
<tr>
<td>Which figure would be preferred by the opposite gender? (Select one)</td>
<td>3.55</td>
<td>3.61</td>
<td>-1.04</td>
<td>191</td>
</tr>
<tr>
<td>Which figures associate with underweight?</td>
<td>1.66</td>
<td>1.67</td>
<td>-1.33</td>
<td>191</td>
</tr>
<tr>
<td>Which figures associate with overweight?</td>
<td>8.47</td>
<td>7.92</td>
<td>7.71***</td>
<td>191</td>
</tr>
<tr>
<td>Which figures associate with obesity?</td>
<td>9.48</td>
<td>9.27</td>
<td>5.70***</td>
<td>190</td>
</tr>
</tbody>
</table>

Note. * = p < .05, ** = p < .01, *** = p < .001

Anti-fat Attitudes:
• Participants who were interested in patient care (M = 4.29), teaching (M = 4.21), and community health/public health (M = 4.35) career options had no differences on weight bias attitudes.

Conclusions:
• Body dissatisfaction and dieting behaviors need to be addressed among college students.
• Despite the BMI controversy, the BMI chart may help define the weight category.
• Weight bias may be a significant concern that needs to be addressed as part of college education.