

Health At Every Size: Clinician Perspectives

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BACKGROUND AND PURPOSE

Research shows that weight stigma can cause harm to patients (e.g., stress, poor health outcomes, increased diabetes risk, etc.).²

In 2003, the Association for Size Diversity and Health (ASDAH) created the Health At Every Size (HAES)3 (see QR code) principles to reduce weight stigma and promote respectful, non weight-centered care.



RESULTS

Results are based upon a qualitative content analysis by two researchers of the data extracted from the ten (10) clinician interviews. Clinicians identified barriers and facilitators to respectful, weight-inclusive care.

Barriers & Facilitators

See Word Cloud for barriers. The most prominent theme for facilitators to weightinclusive care was identified as providing non-weight focused care.

Lack of time Challenges dealing with emotional patients Socioeconomic barriers

Weight-focused care

Lack of training/education

Lack of inclusivity Lack of reimbursement "Overweight" is a problem for solving Clinicians may resist change Food deserts

STUDY DESIGN

- ➤ While current research about Health At Every Size shows the benefit it can have on individuals⁴, there is little information about what clinicians think about integrating HAES principles into their clinical practice.
- > Ten (10) clinicians were interviewed: four (4) medical doctors (MDs), four (4) Physician Assistants (PAs), and two (2) Nurse Practitioners (NPs).
- ➤ Clinicians partook in a 30 minute interview (semi-structured)

Body Mass Index (BMI) Measurement

Clinicians were asked to comment on the BMI metric and its connection to wellbeing, and themes that emerged were: BMI is a useful metric, but it is inadequate, and a potential cause of patient distress.



"I wouldn't say that we would be weight blind, but I guess...it would be a move away from the focus on that." -Participant 06



"BMI could be useful, but it does definitely has some limitations." - Participant 04

CONCLUSION

There may be ways that respectful, weight-based care can be improved in the United States healthcare system. Future research should aim to gain perspectives from a larger, more diverse population of clinicians.

REFERENCES

³Health At Every Size a² Tomiyama AJ. Weight stigma is stressful. A review of evidence for the Cyclic Obesity/Weight-Based Stigma model nd HAES are trademarks of ASDAH

⁴Provencher, V., Bégin, C., Tremblay, A., Mongeau, L., Corneau, L., Dodin, S., ... Lemieux, S. (2009). Health-At-Every-Size and Eating Behaviors: 1-Year Follow-Up Results of a Size Acceptance Intervention