

Patient Perspectives on Weight-Based Stigma and Bias at an FQHC Residency Clinic

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Background

- Weight bias is a highly prevalent and under-recognized issue
- Consequences of weight stigma include depression, anxiety, decreased social involvement, increased allostatic load, and avoidance of healthcare¹⁻⁴
- A number of weight-inclusive practices have been identified, including de-emphasizing weight in conversations about health, using patient-centered communication and language, and ensuring the use of size-appropriate equipment^{5,6}

Objectives

1. To identify the ways in which patients experience weight bias at a federally qualified health center (FQHC) in Madison, WI
2. To explore potential interventions to improve care for patients in larger bodies

Settings and Participants

- We held 1 focus group with 2 participants who receive care at Wingra Family Medical Center in Madison, WI

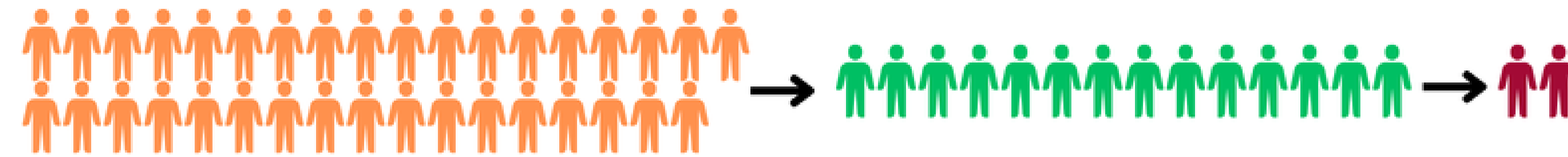
Methods

- We engaged a patient advisory board for feedback on the study topic and recruitment methods and materials
- Flyers were hung in waiting rooms, restrooms, and patient exam rooms
- Participants self-selected and completed an online eligibility survey or contacted the research team directly
- In an attempt to increase participation, recruitment was extended to a second UW Health residency clinic, though no additional participants were recruited
- The focus group was conducted virtually and consisted of open-ended questions asking participants to 1) describe their weight-related experiences in clinic and 2) provide feedback on potential interventions
- Due to low number of participants, we conducted narrative analysis rather than thematic analysis



Results

- The eligibility survey was opened 35 times in 8 months
- 14 patients completed the eligibility survey or contacted the research team
- Of these, 2 patients participated in 1 focus group



Participant Stories

Participant 1

- Experienced weight bias in medical settings most of their life
- Learned to advocate for themselves over time:
 - Changed doctors if they had a negative experience involving weight bias
 - Requested not to be routinely weighed by their clinical team
- Prefers to decenter weight during primary care visits

"I guarantee you nobody has ever lost weight because they got weighed at a doctor's office and it's made them feel empowered, you know? Making people get weighed takes away their power."

Participant 2

- Experiences significant emotional distress in medical settings
- Felt pressured to be weighed during visits
- Had their chronic health issues misattributed to weight
- Interested in decentering weight during primary care visits

"And not only was it... emotionally hurtful, it was dangerous, because I ended up finding out that I actually have sciatic pain because... one of my legs is... shorter than the other, and I never really learned how to walk correctly. So now I have to go through physical therapy. I was going to have to do that anyway, but I wish I had known sooner."

Recruitment challenges

- Despite enthusiastic support for this study from the patient advisory board and apparent interest in participating (flyer tear-off tabs were almost all taken), there was a low volume of completed surveys and even fewer focus group attendees
- Potential reasons for this include:
 - Weight is a sensitive topic for many people
 - It can be challenging to engage marginalized groups (which accounts for much of an FQHC population) in research⁷
 - Recruitment was limited to self-selection in an effort to avoid the potential stigma associated with targeted recruitment based on weight/BMI
 - Focus groups were only able to be conducted in English, excluding a significant proportion of the clinic's patient population

Conclusions

- The two focus group participants shared powerful experiences of encountering and overcoming weight bias in clinic:
 - Participant 1 experienced years of weight bias and gradually **learned how to advocate for themselves** in healthcare settings
 - Participant 2 experienced a **delay in diagnosis and treatment** due to having their chronic health issue misattributed to weight
- Despite general interest in this study, **patient recruitment was a major challenge**
- Future work should be focused on engaging a greater number of patients to share their perspectives on weight bias in primary care clinics

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