

Weight can hold many biases, especially obesity in the medical field. I often hear or see these biases but pick and choose when to stand up to them. As a person who has always been bigger than my friends, as well as having multiple family members that are overweight, I feel for patients that are larger than average size. Although I am aware that being overweight is very unhealthy, there are right and wrong ways to educate patients about their health. I also think it is wrong to talk badly about your patient, even if they are not there to hear it. I have had to stop talking to classmates that repeatedly criticized their obese patients. I have heard comments like “WOAH look at the size of their meal! How can they eat that much?” and “It smells like she forgot to clean under her rolls... if she even has soap”. I made sure to tell them how awful they sounded but chose to not talk to them when I did not have to because it did not stop.

Test results:

During the Implicit Association Test (IAT) you just completed:

Your responses suggested a moderate automatic preference for thin people over fat people.

I did not think my results would say that I have a moderate preference for thin people, although I thought there was a chance I could because of my own self-image. I think that affected my results because I judge myself harder than others. I have always been upset about my weight growing up and have never liked being bigger than all my friends, so I guess I did expect some preference. I do not think that my automatic responses reflect my thoughts and/or actions towards patients, but only on myself. I have always thought that I would be more “loved, beautiful, happy,” rather than “horrible” (the words on the test) if I looked like the silhouettes that I was linking the words with.

As a team leader, I would advocate for the patient’s right to have equal and therapeutic care. Everyone deserves fair treatment, and no bias makes any patient more important than another. I would make sure to address the situation with the nurse and take things to someone in a higher position if needed. I have never understood why someone would complain about these factors because they applied for nursing school, as well as their job. It is not the patient’s fault if they hate their job. There is a difference between being frustrated with one intervention at the moment because they’re busy and complaining because of a patient’s ethnicity or physical abilities. Biases like that can be detrimental to patients. “Weight bias makes it less likely for patients who are overweight to seek medical care for general medical concerns and even for issues not related to weight” (Team, 2022). Late care can lead to worse diagnoses and outcomes.

Team, N. N. and C. (2022, June 16). *Nursing strategies for overcoming weight bias in healthcare*. Nursing CE Central. <https://nursingcecentral.com/nursing-strategies-for-overcoming-weight-bias-in-healthcare/#:~:text=Weight%20bias%20is%20holding%20negative,issues%20not%20related%20to%20weight>.