

1. Once you have selected a topic, please reflect (in writing) on any biases that you may already be aware of towards this group. **Answer this question before you complete the implicit bias assessment.**

I will be completing the Weight IAT. The biases I have are that people who are significantly overweight may not care about their health and may not care to change their health situation. I understand that some people become overweight due to medical conditions or medications they are taking. I associate people who are overweight with more health concerns, particularly type II diabetes, atherosclerosis, myocardial infarction, and hypertension. This is due to the high sodium and sedentary lifestyle that overweight individuals often lead. I also associate people who are overweight with being of lower income and education status. Education leads people to make better decisions for their health and having a higher income allows people to be able to afford healthier food options.

People who are thin may be experiencing disordered eating, medical conditions that prevent them from maintaining a healthier weight, or they may be leading a healthier lifestyle. Generally, I think of thinner people as having fewer health complications because they may have better access to healthier foods and better education leading to better jobs that have better medical insurance coverage. I am aware that the situation varies from person to person, but it often seems like people who are overweight lead a lifestyle that puts them at risk for many health concerns.

2. Next, take the selected implicit association test. What did the results of test say about your implicit biases towards this group?

My response showed that I have a moderate automatic preference for thin people over fat people.

3. Based on your initial reflection, how do these results compare?

These results align with the bias I discussed previously regarding the association with thinner people as having better health outlooks, better access to healthier foods and education due to higher income. The bias I have towards individuals' weights are "concerns relate to the potential effects of implicit bias on already disadvantaged patient groups, such as the poor, children, and those with low health literacy, who are already vulnerable to limited health services" (Alspach 2018). As discussed previously, the bias I have towards individuals of different weights are associated with these further biases.

4. As a team leader, how would you respond to another nurse who complains of taking care of a specific ethnic group or states, "I am tired of taking care of patients who don't take care of themselves"?

I would explain that not all patients have the ability to access medications, food, insurance, shelter, transportation to help themselves. The patient may also lack a support system. I would encourage the nurse to facilitate discussion with the patient to find areas that are preventing the patient from caring for themselves. I would then encourage or work with the nurse to find programs that will help this patient meet their needs. Having open communication with the patient to learn why they are unable to care for themselves will help determine areas that need addressed.

Reference:

Alspach, J. (2018, August). Implicit bias in patient care: An endemic blight on quality care. *Critical Care Nurse*, (38),4, 12-16. Retrieved from <https://aacnjournals.org/ccnonline/article/38/4/12/3698/Implicit-Bias-in-Patient-Care-An-Endemic-Blight-on>