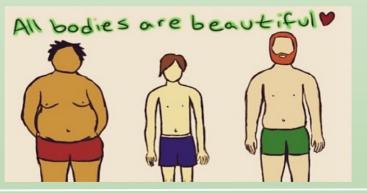
# DEI Pearl: January Newsletter



## January: Bariatric Patient Awareness

- Obesity in the US is on an <u>upward trend</u> with the prevalence being 41.9%.
- Patients with obesity have <u>2x higher</u> chance of <u>ICU admission</u>, are likely to <u>stay 50% longer</u>, and have a <u>40% increased risk of readmission</u> within 28 days than patients who are not obese.
- <u>Socioeconomic status</u> and <u>ethnicity</u> play a major role in obesity.
  - People with college degrees have lower obesity prevalence compared to <u>those with less education</u>.
  - <u>Non-Hispanic Black adults</u> have the highest prevalence of obesity, followed by Hispanic adults.



### **Quick Stats Providers Should Know!**

- <u>Stigma towards bariatric patients can negatively impact patient outcomes</u> and the quality of care the patients receive.
  - Patients with obesity commonly feel stereotyped by their providers which leads to <u>increased stress</u> in patient-provider encounters.
- While providers should view weight management as important many lose hope or patience and stop trying to advocate and provide help to their patients.
  - Building a positive relationship with your patient is key to finding ways to work with them instead of against them to improve their health.
  - <u>Lack of equipment is a big concern</u> for bariatric patients be the provider that advocates for them to get proper care and access to necessary equipment.
- **Language** used by providers when discussing a patient's weight is crucial!
  - Use of poor language can cause reduced motivation and lead to avoidance of health care in the future.

# Strategies to Address Obesity Stigma In Your Environment

### Who's job is it to reduce weight stigma in health care? All healthcare staff! (Especially us!)

- Minimize the perception and acceptance that an "anti-fat bias" is normal.
- Implement a zero tolerance policy for unprofessional comments involving patients' weights.
- Reduce the focus on body weight base your visits on conditions associated with obesity as risk factors and promote healthy lifestyles modifications.
- Always be aware of your own biases and stereotypes!

# LANGUAGE IS POWERFUL

Replace "bad" with better words and phrases (Adapted from "Bad words: why language counts in our work with bariatric patients")

#### "BAD" WORD OR PHRASE

#### **BETTER WORD OR PHRASE**

Obesity	Weight, BMI
Obese patient	Patient with obesity
Morbid obesity	Severe obesity
Good/bad foods	More or less healthy
Exercise	Physical activity
Why?	What gets in the way?

#### "BAD" WORD OR PHRASE

#### **BETTER WORD OR PHRASE**

Noncompliance	Non-adherence
Recidivism	Weight regain
Normal weight, normal BMI	Healthy weight, BMI
Failure	Objective description of specific outcome

# Resources to Further Your Education

### Impact of Weight Bias and Stigma on Quality of Care and Outcomes for Patients with Obesity

Impact of weight bias and stigma on quality of care and outcomes for patients with obesity

### Choosing Words Wisely When Talking to Patients About Weight

Choosing words wisely when talking to patients about weight < Yale School of Medicine

Newsletter by: Mitchell Brown

"Obesity affects every aspect of people's lives, from health to relationships"

Jane Velez Mitchell

### Other Sources We Used...

Clinical outcomes for the obese hospital inpatient: An observational study - PMC. Impact of weight bias and stigma on quality of care and outcomes for patients with obesity Obesity management: Australian general practitioners' attitudes and practices Choosing words wisely when talking to patients about weight < Yale School of Medicine