

Staff knowledge, attitudes and perceptions of weight bias at the North Bay Parry Sound District Health Unit (NBPSDHU)

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Introduction: Emerging literature is demonstrating that weight bias continues to be a health equity issue during the COVID-19 pandemic.

Objectives: To gather baseline data about organizational culture and staff knowledge related to weight bias at the NBPSDHU to inform program planning.

Methods: All NBPSDHU staff (n=213) were invited to complete a 10-minute online survey (CheckMarket[®]) consisting of 16 questions. The survey included multiple choice, Likert scale and open-ended questions. Following ethics approval, a recruitment email was sent. The survey was open for two and a half weeks. Descriptive data analysis was completed with CheckMarket[®], while qualitative data was thematically analyzed.

Results: 132 staff responded with an 80% completion rate (n=105). Over half (55.0%) received weight bias training in the fall of 2019. Overall, respondents understood what weight bias is (96.0%) and its negative implications on health (89.6%). Respondents also recognized the importance of (87.35%), and supported the need to (91.2%) address this issue within the organization. Four themes arose related to organizational barriers to addressing weight bias: lack of education/training; physical environment/equipment; weight-based clinical screening practices; and inequitable representation/inclusive practices related to body size diversity. The themes corresponded with suggestions to deconstruct these barriers and aligned with suggested supports required for staff to address weight bias.

Conclusion: Respondents were well informed about weight bias. Organizational barriers to reducing weight bias, and suggestions to mitigate these barriers were identified, as well as supports staff feel they need to contribute to reducing weight bias within the organization. This information will inform NBSPDHU program planning.

Significance: This research may provide insight to public health dietitians related to raising awareness about, and mitigating weight bias in the public health practice setting. Results may also be transferable to community and clinical practice settings.