Using Trigger Films as a Bariatric Sensitivity Intervention to Improve Nursing Students' Attitudes and Beliefs

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Disclosures

Conflict of Interest:

Margie Molloy reports **no conflict of interest** and did not receive sponsorship or commercial support for this project.

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Learning Objectives

Upon completion of this educational activity, participants will be able to:

1. Examine how unconscious biases can impact the care given to a patient
2. Explain why obesity bias has increased and its impact on quality of healthcare
3. Identify contributing factors of obesity, including genetics, biology, sociocultural influences, the environment, and individual behavior.
4. Enhance personal and professional practices to optimize sensitivity to the needs and concerns of patients
Background

➢ 2/3 of American adults are overweight or obese
  ▪ Obesity rates > 30% in 12 states. ¹

➢ Prevalence of weight discrimination in the U.S. increased 66% in one decade. ²

➢ Negative attitudes toward obesity are widespread among health care providers. ³

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Many obese patients report negative experiences with their health care providers

In a survey\(^4\) of 498 U.S. women with BMI >25:

- 52% said weight stigma was “barrier to getting appropriate health care”
- 36% reported disrespectful treatment by providers
- 36% reported negative health care provider attitudes
- 46% had received unsolicited advice to lose weight
- 41% delayed seeking health care or getting screened for cancer because of their weight
- All of these percentages increased significantly with increasing BMI

Healthcare provider bias against obese patients compromises care quality and health outcomes.

Patient may experience:
- Shame
- Embarrassment
- Humiliation
- Perceived insult
- Lack of respect
- Rejection
- Anger

Possible patient responses:
- Non-adherence to treatment plan
- Missed appointments
- Avoiding follow-up
- Postponing or avoiding screening / preventive care
- Seeking other providers without requesting transfer of medical records
- Foregoing needed medical care

If the health care provider of an obese patient expresses negative attitudes toward obesity.
Nurses often have preconceived biases against obese patients and exhibit negative attitudes and behaviors, and nursing students often have similar issues.⁵,⁶

Nurse educators are uniquely positioned to improve obesity-related attitudes and beliefs among prelicensure nursing students, by:

- Providing content that focuses on delivering sensitive care to obese patients
- Designing and implementing bariatric sensitivity interventions

Goals

➢ Develop a **bariatric sensitivity intervention (BSI)** for pre-licensure nursing students

➢ Implement BSI in first-semester pre-licensure curriculum

➢ Evaluate effects of BSI on obesity-related attitudes and beliefs of pre-licensure students
Procedures

➢ Intervention Design

▪ Created 6 trigger films (< 4 minutes each)
  ▪ Trigger films: short, social-guidance educational videos intended for student audiences, which focus on themes that engage the affective domain.
  ▪ Content of trigger films: simulated scenarios in which members of healthcare team exhibit insensitivity to patients with obesity and engage in nonprofessional nursing behavior

➢ Intervention Delivery

▪ Delivered during a 1-hour Health Assessment Course class period
Intervention Design

Trigger Films + Facilitated Debrief = Bariatric Sensitivity Intervention (BSI)
## Descriptions of 6 Trigger Films Created for BSI

<table>
<thead>
<tr>
<th>Film</th>
<th>Actors</th>
<th>Location</th>
<th>Content</th>
<th>Issues Addressed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Nurse, patient</td>
<td>Patient’s room</td>
<td>Nurse gives condescending and disrespectful lecture about how to lose weight to an obese patient, without having been asked to do so</td>
<td>Bias: obese patients can lose weight if they are motivated and exercise self-control; nurse verbalizes negative attitudes about obesity with intent of “motivating” patient</td>
</tr>
<tr>
<td>2</td>
<td>Nurse, Unit clerk</td>
<td>Nursing station</td>
<td>Loud discussion about special equipment needed to care for a bariatric patient (bariatric gown, scale, chair)</td>
<td>Insensitive conversation about patient needs can be overheard by other patients and visitors (possible HIPAA violation)</td>
</tr>
<tr>
<td>3</td>
<td>2 staff nurses</td>
<td>Break room</td>
<td>Nurses gossiping in break room express their surprise that a bariatric patient is author of a “steamy” best-selling romance novel</td>
<td>Bias among health care providers that obese patients are lazy and unsuccessful in both work and personal life; lack of respect for patient; potential issues with privacy/confidentiality of patient health information</td>
</tr>
<tr>
<td>4</td>
<td>2 nurse practitioners</td>
<td>Nursing station</td>
<td>NPs discuss their conflicting beliefs about whether obesity is controllable and whether obesity should be treated as a disease</td>
<td>Bias among health care providers that obesity is caused by lack of “self-control, irrespective of genetic and environmental factors</td>
</tr>
<tr>
<td>5</td>
<td>Nurse preceptor, 2 nurse orientees</td>
<td>Hall outside patient’s room</td>
<td>Preceptor jokes that patient is “TFTB” (too fat to breathe); nurse orientees are visibly shocked</td>
<td>Poor role modeling by health care provider in position of power; public expression of derogatory stereotypes about obesity (which patient might overhear)</td>
</tr>
<tr>
<td>6</td>
<td>2 staff nurses</td>
<td>At (open) door of obese patient’s room</td>
<td>Female nurse asks male nurse to help her raise obese patient in bed to avoid “wasting time” with the ceiling-mounted lift; he tells her to spare his back and use the lift</td>
<td>Issues: non-adherence to best practices in providing safe nursing care to obese patients; gender stereotyping; insensitivity (patient is likely to overhear conversation indicating that both nurses are reluctant to provide care)</td>
</tr>
</tbody>
</table>
Example of a Trigger Film

Action takes place in nurses’ break room

Nurse Jo is caring for 520 lb. patient

Video is 1 minute in length

Vignette #3: Nurse-Nurse Conversation
Intervention Evaluation

We evaluated effects of BSI on:

Students’ **attitudes** toward obesity:
- Nurses’ Attitudes Toward Obesity & Obese Patients Scale (NATOOPS)

Students’ **beliefs** about obese persons:
- Beliefs About Obese Persons (BAOP) Scale

Both instruments were administered:
- Before
- Immediately after Delivery of BSI
- 30 days after
Nurses’ Attitudes Toward Obesity & Obese Patients Scale (NATOOPS): Subscale Scores Before, Immediately After, & 30 Days After Intervention

**Response to Obese Patients**
- Mean Adjusted Scores:
  - Before: 460
  - Immediately After: 500
  - 30 Days After: 540

**Characteristics of Obese Individuals**
- Mean Adjusted Scores:
  - Before: 500
  - Immediately After: 520
  - 30 Days After: 540

**Controllable Factors Contributing to Obesity**
- Mean Adjusted Scores:
  - Before: 400
  - Immediately After: 450
  - 30 Days After: 500

**Stereotypic Characteristics of Obese Patients**
- Mean Adjusted Scores:
  - Before: 60
  - Immediately After: 55
  - 30 Days After: 50

**Supportive Roles in Caring for Obese Patients**
- Mean Adjusted Scores:
  - Before: 120
  - Immediately After: 130
  - 30 Days After: 140

Scores significantly different:
- ★ before vs. immediately after BSI
- ★ before vs. 30 days after BSI
- ns: no significant difference
Higher BAOP score indicates stronger belief  that obesity is not under the obese person’s control.
Conclusions

A well-designed Bariatric Sensitivity Intervention (BSI) exploring obesity issues can have positive impact on nursing students’ attitudes and beliefs about caring for obese patients.

Attitudes about obese persons are positively changed when obesity is attributed to genetic and/or environmental factors.

Beneficial effects of this intervention may not be sustained unless mechanisms are in place to reinforce its content throughout the nursing curriculum.

This project could be replicated to determine whether the BSI would be more effective if delivered later in the curriculum.
Implications for Nurse Educators

- Exposing students to **simulations** using bariatric-sized manikins/models & bariatric equipment before clinical entry
- **Sharing current research** with nursing students about causes, health risks, and effective nursing interventions associated with obesity, in order to reduce stigmatization of obese patients
- **Modeling** use of supportive communication and language when talking to overweight or obese patients

Further research needed to develop effective interventions for improving student attitudes and reducing bias, stigma, and discrimination against obese patients.
Bariatric Simulation with ABSN Students
It Takes Team...

Special thanks to:

Drs. Mary Elizabeth Guimond, Susan Silva and Valerie Sabol for your mentorship and support throughout this quality improvement project.

The cast and crew of the BSI Trigger Films… you all deserve an academy award!

This project for reminding me to explore my personal biases and how they can influence the provision of patient care.

To the audience for your commitment to quality care for vulnerable populations!