

Advocacy Morning Report

3/21

Inclusive Office Space and Visits

A vague case

- 16 yo patient comes in for a well check
- Has a history of an eating disorder, and is weighed with the scale number visible.
- Provider turns the growth chart to the patient to show them the weight and height early in the visit (without asking)
- Provider asks about diet and exercise and would like to order labs (but did not on the previous patient with a lower BMI)
- Does mental health screens on patient in front of parents
- Parents comment “they have no reason to be depressed, they have a great life.”
- The parent asks “What weight should my child be?”

Words Matter

- Use person-first language to focus on the individual, rather than the diagnosis or condition
- Consider your use of “vulnerable” and “marginalized.”
 - For example, instead consider using “people experiencing barriers or people with less resources.”
- Focus on a person's abilities, contributions, and aspirations as opposed to their limitations.
- Do not use words that can suggest or perpetuate undesirable stereotypes, including when talking about people without disabilities
 - avoid using words like “able-bodied” and use “nondisabled” instead.
- The term “racial/ethnic minority” can be misleading or inaccurate, or pejorative.

Health At Every Size (HAES) Principles

- Health status or weight should never be used to judge, oppress, or determine the value of an individual.
- Accept and respect the inherent diversity of body shapes and sizes and reject the idealizing or pathologizing of specific weights.
- Provide information and services from an understanding that socio-economic status, race, gender, sexual orientation, age, and other identities impact weight stigma
- Support physical activities that allow people of all sizes, abilities, and interests to engage in enjoyable movement.
- Promote flexible eating based on hunger, satiety, nutritional needs, and pleasure, rather than any externally regulated eating plan focused on weight control.

Other Inclusive Actions

Office spaces to accommodate bodies of various sizes:

- Chairs and doors that fit diverse bodies
- Consider skipping weights if not needed or you have a recent one
- Posters/art and staff with diverse bodies

Accommodating preferred choice of feeding infants:

- Ensuring resources to afford formula if needed
- Pillows, clean rooms, time for breastfeeding
- Lactation support
- Addressing all parents/caregivers

Other Inclusive Actions

- Normalize conversations about mental health, and discuss confidentiality with teens.
- Hire diverse staff, diverse doctors
- Follow up on Bright Futures questions with a “positive” screen, and screen universally as appropriate.
- Monitor for race-based medicine practices
- Respect pronouns and encourage staff to use appropriately
- Signage to denote values such as “vote kids” or “all are welcome here”

Resources

https://publications.aap.org/pediatrics/article/150/1/e2022057998/186963/Eliminating-Race-Based-Medicine?_ga=2.85516249.1555138880.1679361577-203059356.1600350257?autologincheck=redirected

<https://www.aap.org/en/about-the-aap/american-academy-of-pediatrics-equity-and-inclusion-efforts/words-matter-aap-guidance-on-inclusive-anti-biased-language/>

<https://asdah.org/health-at-every-size-haes-approach/>