Aim 1: Understanding Patient Experiences and Perspectives

- Women’s experiences were overwhelmingly positive with some exceptions throughout their care.
- Women described feeling that their weight affected their care and the need to advocate for themselves.
- “The biggest problem I had--and no one would tell me that's what it was, but I know that's what it was when I was doing the genetic blood testing---it kept three times or two times coming back inconclusive.”
- Women recalled negative interactions with previous providers and fear of bias.
  “…if there is bias that because you’re overweight you don’t take care of your health so we aren’t going to give you all the information is kind of the feeling you sometimes get.”

Aim 2: Future Educational Opportunities

- Women are interested in educational opportunities pertaining to physical activity, nutrition, and weight management.

Aim 3: Weight-Related Terminology

- “Weight” is regarded as a desirable term and “large size” is regarded as undesirable by patients with obesity.
- Few studies examine the preferences of pregnant women with obesity.

Conclusion

- Women with obesity report a high prevalence of experiences with weight-related stigma and bias in clinical settings.
- Providers caring for pregnant women with obesity should be aware of weight-related terminology used to describe weight.
- Women rated “weight” and “BMI” as the most desirable terms.
- Women rated “large size” and “obesity” as the least desirable terms.
- Potential for Inclusivity.
  - Educational opportunities aimed at supporting women with obesity through pregnancy.
  - Using intake forms to give women a choice in the terminology used to describe weight.

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