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Living large: the experiences of large-bodied women when accessing general practice services

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Abstract

The ‘obesity epidemic’ of the past two decades has resulted in numerous studies reporting higher levels of stigma and discrimination experienced by obese/overweight women, both within the health care system and society in the main. Despite general practice being the most utilised point of access for health care services, there has been very little international or national exploration of the experiences of large-bodied women accessing these services.

Utilising a qualitative, descriptive research design, this post-structuralist feminist study has enabled a group of large-bodied women to express their stories of accessing general practice services. Eight self identified large-bodied women volunteered to participate in semi-structured face-to-face interviews. Thematic analysis identified seven themes: Early experiences of body perception, Confronting social stereotypes, Contending with feminine beauty ideals, Perceptions of health, Pursuing health, Respecting the whole person and Feeling safe to access care.

The women in this study articulated broader interpretations of health and well-being than those teachings reproduced within dominant bio-medical and social discourses of obesity. When these women’s personal context, beliefs and values are silenced by the health care provider, the rhetoric of health care professional claims of patient-centred care has given way to these women experiencing stigmatisation and a sense of ambiguity about general practice services. However, when space is given for multiple interpretations of obesity to exist within the patient-health care provider relationship, these women feel respected, their health needs are satisfied and they are more comfortable to engage in health screening services. Resisting the powerful socio-cultural milieu which supports the superiority of a slim female body as a signifier of both health and beauty presents a challenge for health care professionals to negotiate. I contend however, that giving consideration to the perspectives of large-bodied women and critically reflecting upon one’s own personal beliefs and attitudes about the overweight/obese, presents an opportunity to ensure clinical practice for this population is truly patient-centred.
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