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Fat Bias in the Field of Psychology: Examining Diversity Counseling Texts and Clinical Judgment Across College Counseling Centers

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FAT BIAS IN THE FIELD OF PSYCHOLOGY: EXAMINING DIVERSITY COUNSELING TEXTS AND CLINICAL JUDGMENT ACROSS COLLEGE COUNSELING CENTERS

A Dissertation

Submitted to the School of Graduate Studies and Research
in Partial Fulfillment of the
Requirements for the Degree
Doctor of Psychology

Ashley E. Kasardo
Indiana University of Pennsylvania
May 2015

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Title: Fat Bias in the Field of Psychology: Examining Diversity Counseling Texts and Clinical Judgment Across College Counseling Centers

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The presence of fat bias in the field of psychology was investigated by two studies: a documentation of the level and content of size coverage in diversity counseling textbooks, and examination of the impact of client weight on clinical judgments made by college counseling center clinicians. In the first study, the content of 29 diversity counseling textbooks were reviewed for coverage of weight bias. Index terms and chapter subtitles were used to locate texts, which were examined in terms of themes. Inter-rater reliability was established. The most frequently occurring index terms included women, body image, and eating disorders. The most frequently occurring thematic concepts included the thin ideal/cultural values and eating disorders. Only one textbook provided an in-depth discussion about size as a diversity concern. Overall, coverage of size in the texts was either absent or pathologized. In the second study, counseling center clinicians (n = 111) completed an online questionnaire consisting of a client intake report and questions pertaining to prognosis, diagnosis, and treatment plan. Only weight label of the client was varied (obese, overweight, full-figured, no descriptor). Reference to the client's weight using varied labels did not significantly impact how clinicians rated the client along personality variables, prognosis, diagnosis, their desire to work with the client, the GAF range assigned, treatment duration, and referral. When the client was labeled as obese, counselors perceived the client as more likely to have eating concerns as compared to the client labeled as full-figured. Respondents were more also more likely to say they would utilize weight

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loss as a treatment goal for the client labeled as obese as compared to the other weight label conditions. This study raises questions about the appropriateness of weight-related language as biases might emerge as a result of weight labeling. Compared to previous clinical judgment research, less fat bias was found among clinicians in this sample. Both studies evidence medicalization of size associated with the term obese. Recommendations for size-affirming therapy work are discussed.