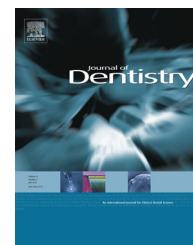


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The effect of dentists' body-weight size on student social judgments of dental skill and patients' behavioural intentions: A vignette study

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ABSTRACT

Objectives: Where previous work has suggested that over-weight individuals may be subject to negative social judgments, a finding also seen in judgments applied to healthcare professionals (HCPs), this study investigated whether these findings extend to judgments made about dental practitioners.

Methods: A photo of a normal weight male and one of a normal weight female dentist were digitally modified to reliably show them as overweight, giving a total of 4 conditions. In a single-blind quasi-randomised controlled study of 302 undergraduate and postgraduate student participants used a 5 point Likert scale to appraise a single, gender-matched colour photograph as to whether they thought the dentist depicted was competent, professional, caring, had patients' best interests at heart, and was a good dentist. They further rated their future intentions to follow behavioural advice (reduce snacking and take-up flossing) given by the depicted dentist.

Results: The data were analysed using independent sample t-tests. There were no differences in outcomes as a function of the weight status of the depicted dentist in any of the variables explored with the exception of the normal-weight images being rated as more caring than the overweight ones ($p < .04$).

Conclusions: Images of overweight dentists do not receive lower social judgement ratings than images of normal-weight dentists. Previous research in medicine reporting adverse social judgments made of over-weight HCPs does not apply to dental practitioners. Future research should focus on factors that may explain these findings.

Clinical significance: Dentists appear to be protected from the adverse effect of overweight on social judgments of their personal characteristics and on their health-promoting advice.

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1. Introduction

The influence of a person's dentition¹ and overall appearance² on social judgments has been experimentally investigated before with researchers concluding that an individual's overall level of attractiveness is more important than their dental condition in relation to social judgments.² Thus irrespective of the presence of caries, digitally modified photos of objectively rated highly attractive faces, were appraised more positively than those of lower attractiveness on outcomes such as popularity, friendliness, intellectual ability and psychological adjustment.²

Overweight and obesity accounts for 2.8 million adult deaths and is the fifth leading risk for global mortality.³ Obesity is negatively associated with attractiveness^{4,5}; additionally, obese individuals are vulnerable to negative stereotypes, including perceptions that they are lazy, lacking in willpower, ill-disciplined and unintelligent.⁶ Such perceptions often result into stigma, prejudice and discrimination.⁷

Obese people are not only judged by society but they are also judged by healthcare professionals (HCPs). For example, a systematic review concluded that HCPs, such as doctors and nurses, possess negative attitudes towards obese patients.⁸ Similar findings have been reported extensively in other studies of different HCP groups and across a range of clinical settings and countries.^{9–21}

A large numbers of HCPs are overweight or obese with 300,000 United Kingdom National Health Service (NHS) staff classified obese and a further 400,000 as overweight.²² Just like HCPs appear to hold negative views of their overweight or obese patients, it is reasonable to hypothesize that the patient's perception of a HCP may be influenced by the HCP's body size. Patients have reported higher confidence in advice received from non-overweight doctors^{7,23}; similarly a US sample reported higher confidence in normal rather than overweight nurses to provide education about diet and exercise.²⁴ These results have serious implications for the effective delivery of healthcare given that HCPs through their relationships with patients need to be at the forefront of helping individuals change their lifestyles.²⁵

Whilst the effect of HCPs' weight on patients' perceptions of the HCPs' ability have been explored within a medical context, it is not known whether and to what extent they may be generalised to dental settings. Thus, whilst people have less confidence in the advice from overweight or obese HCPs, it is not known whether the same effects apply to dental practitioners. Dentistry differs from medicine in many respects with up to 25% of the adult population experiencing negative feelings about dentists and dental visits in the first place.²⁶ Some early work reported a relationship between the gender and ethnicity of a dental health professional and patient views regarding competence, how caring they were and ultimately whether the patient would choose them as their HCP.²⁷ More recently, British people reported a preference for younger (rather than older) and British (rather than Asia)-trained dentists in an online vignette study experimentally manipulating gender, age and dentist ethnicity.²⁸ Within this framework of social judgments, it is important to examine whether people's perceptions of a dentist's

competence may be influenced by the dentist's body-weight size.

This study explores social judgments relating to an image of a dentist of different body-weight size (normal weight vs overweight) and their relationship with professional credibility and as a health promotion messenger. The study's research aim was thus to explore whether the body-weight size of a dentist impacts upon people's perceptions of their credibility and their ability to give health promotion messages? We predicted that images of overweight dentists would produce different social judgement ratings than images of normal-weight dentists.

2. Materials and methods

In an independent group, quasi-randomised single-blind, cross-sectional survey design we investigated the influence of body size (2 levels: participant gender-matched photographs of normal weight-size dentists and photographic images of the same dentists digitally enhanced to appear obese) on the likelihood to follow their oral health advice, competence/professionalism, trust, perception of professional credibility (i.e. whether the dentist has the patient's best interests at heart, whether they are caring, whether they are a good dentist) and attractiveness.

Three hundred and two ($N = 302$) volunteer non-healthcare students ($N = 166$ Politics, $N = 67$ Human Resource Management, $N = 35$ Human Nutrition, $N = 34$ Marketing) from a large London university were recruited. The participants agreed to take part in a study to 'explore how people make decisions about their oral health.' Data were collected in March 2013 and in accordance with the Helsinki Declaration for studies involving human participants. The study was approved by the university's local research ethics committee (ethics ref: BDM/12/13-42).

In order to obtain reliable materials for the study two images depicting either a normal weight-size male or a normal weight-size female person in their mid-late 40s, wearing a white dental tunic and standing behind a dental chair were used. These images were subsequently digitally modified to produce overweight-size versions of the same people. Photographic enhancement to examine social judgement has been used successfully previously.^{1,2,29–32} The four images were validated by a panel of 40 university staff and students, (33 women, 7 men, 3 non-Caucasians) who independently rated the male and female images as either normal weight-size or overweight-size (male images chi-square = 27.14, d.f. = 1, $p < .001$; female images chi-square = 37.35, d.f. = 1, $p < .001$). Although the images were modified to the point that they were rated overweight, we did not change the images with a specific BMI in mind, nor did we ask our independent raters to judge the images' BMI given that BMI is difficult to estimate from a visual image.³³

Participants' social judgments were measured using a questionnaire. The constructs assessed were:

- Two items regarding behavioural intention about oral health: how likely they were to floss their teeth at night/only eat sugary foods with their meal (rated on a scale from very likely to very unlikely)

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