

Using the ATOP and BAOP tools to assess attitudes

As part of this sensitivity training module, there are two self-assessments that providers and health care professionals can complete. The first is called the **Attitudes Toward Obese Persons Scale (ATOP)**, and the second is called the **Beliefs About Obese Persons Scale (BAOP)**. These two brief surveys can be used in group seminars or training sessions with providers. These tools are structured, validated measures that can be used to help increase self-awareness of bias toward obese patients, and to generate discussions about weight-based stereotypes and beliefs about the causes of obesity which may set the stage for biased attitudes.

Because these tools ask direct questions about attitudes toward obese persons, providers may be reluctant to share their survey results with others. It may be best not to focus on actual responses to the questions in group discussions. Rather, the intention of these tools is to generate discussion and awareness about beliefs and stereotypes which could reinforce bias or prejudice toward patients.

If you would like to use these tools for research purposes and data collection, scoring information is provided in this module.

If you would like to learn more about these surveys, here are several published studies that have used these measures:

Friedman KE, Reichmann SK, Costanzo PR, Zelli A, Ashmore JA, Musante GJ. Weight stigmatization and ideological beliefs: relation to psychological functioning in obese adults. *Obes Res.* 2005; 13: 907-916.

Puhl R, & Brownell KD. Confronting and coping with weight stigma: An investigation of overweight and obese individuals. *Obesity.* 2006; 14: 1802-1815.

For information about the psychometric properties of these scales, please consult the following reference:

Allison DB, Basile VC, Yuker HE. The measurement of attitudes toward and beliefs about obese persons. *International Journal of Eating Disorders.* 1991; 10: 599-607.

