Differences in Public and Professional Perceptions between Canada and the U.S.

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Faculty/Presenter Disclosure

- Faculty: Ted Kyle
- Relationships with commercial interests:
 - Grants/Research Support: Obesity Action Coalition
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Disclosure of Commercial Support

- This program has received financial support from no one in the form of anything.
- This program has received in-kind support from no one in the form of anything.
- Potential for conflict(s) of interest:
 - Ted Kyle has received nothing from any organization connected with this presentation.
 - No products will be discussed in this program.







Mitigating Potential Bias

 We have no commercial bias to mitigate in connection with this program.





Background





Pervasive Bias Hampers Clinical Care and Obesity-Related Policy

- Blaming people living with obesity
- Counterproductive tension between prevention and clinical care
- Dysfunctional medical dialogue

"Our findings add to a growing body of literature that challenges a number of widely held assumptions about obesity within a health care system that is currently unsupportive of individuals living with obesity."

Kirk et alQual Health Res, 2014







Weight Bias Compounds the Harm of Obesity











Understanding External Causes of Obesity Plays a Role in Bias

- People express bias when they perceive it as a choice
- People reject bias when they understand the external causes of obesity

Sources: Crandall, 1994; Crandall & Moriarty, 1995; Crandall et al., 2001; DeJong, 1993; Puhl, Schwartz,

Brownell, 2005.









Study Objectives

- Measure the prevalence of different perceptions of obesity
- Look for potential differences
 - Between the U.S. and Canada
 - Between the public and healthcare professionals
 - Between French and English-speaking Canadians







Methods





Online and Smartphone Samples Obtained via Google Consumer Surveys

Online Sample

- 8,670 Total
 - 2,817 CA POP
 - 3,850 U.S. POP
 - 1,000 CA HCP
 - 1,003 U.S. HCP

Smartphone Sample

- 3,959 Total
 - 1,000 CA-Eng POP
 - 2,000 CA-Fr POP
 - 959 CA-Fr HCP

Note: HCPs include physicians, RNs, dietitians/nutritionists, healthcare policy/mgmt







Questions

Which phrase comes closest to describing the type of problem that you think obesity is?

- O Personal problem of bad choices
- O Community problem of bad food & inactivity
- Medical problem
- A totally different type of problem

Quelle phrase tend à décrire le mieux, votre perception du genre de problème qu'est l'obésité?

- O Un problème individuel fait de mauvais choix
- Malbouffe et inactivité: un problème social
- O Un problème médical
- O Un problème complètement différent





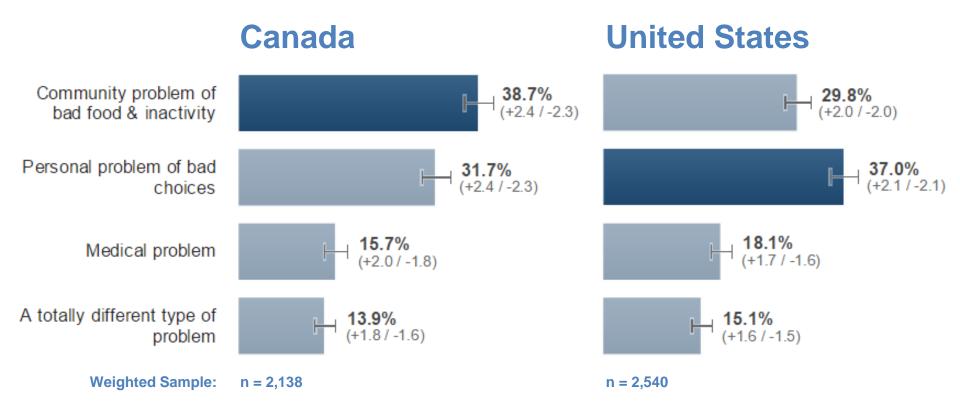


Results





The Canadian Public Views Obesity More as a Community Problem than the U.S.







French-Speaking Canadians Are Most Likely to View Obesity as a Community Problem

French-Speaking **English-Speaking** Malbouffe et inactivité: un problème social Un problème individuel fait de mauvais choix Un problème médical Un problème complètement différent **Smartphone Sample:** n = 1.000n = 2.000





HCPs Hold Similar Views of Obesity in Both Countries

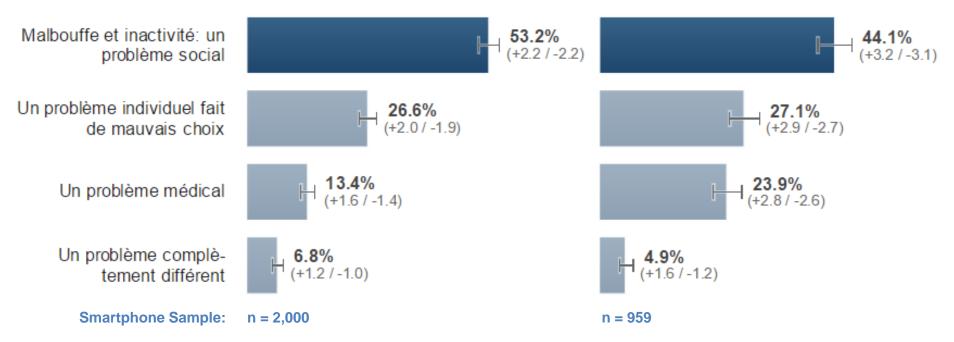
United States Canada Community problem of bad food & inactivity Personal problem of bad choices Medical problem A totally different type of problem Weighted Sample: n = 576n = 676





HCPs in Canada Less Likely Than Public to View Obesity as a Community Problem

French-Speaking Canadians Public HCPs









Conclusions



- Greater understanding of obesity as a community problem in Canada
- Especially among
 French-speaking Canadians
- Suggests greater appreciation for shared risks
- May offer opportunities for more effective strategies
- And for reducing bias







Thanks!

Ximena Ramos Salas





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