

Patterns of Public Opinions about Obesity and People with Obesity in Sweden, UK, Germany, and Italy

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Introduction

Weight bias (WB) is an impediment to progress toward adoption of evidence-based strategies to address obesity.¹ Substantial social, medical, and economic harm to people with obesity (PwO) results from WB. Key elements of WB include blame directed at PwO, assumptions of laziness or poor discipline, and social rejection.² Recent evidence found a consistent presence of WB in 4 countries,³ but limited international comparisons exist to understand the nature and patterns of these attitudes across countries. The present research measured beliefs about the causes of obesity, and also beliefs and attitudes about PwO in Sweden (SE), UK, Germany (DE), and Italy (IT).

Methods

Random samples totaling 34,320 adults completed anonymous, voluntary online surveys between Oct 2016 and Jan 2017. Microsurveys required only one response per participant to reduce fatigue with multiple questions. Likert scales (5-point) measured agreement with 4 narratives regarding causes of obesity,⁴ as well as perceptions of blame, social acceptance, laziness, and self-discipline of PwO. Descriptive statistics were analyzed to identify significant differences between and within the four countries.

Results

Agreement that obesity results from addictive junk food was high in all 4 countries, highest in SE (mean agreement 3.8±0.1) and IT (3.9±0.1). Belief in irresponsibility as a cause of obesity was higher in SE (3.3±0.1), UK (3.3±0.1), and IT (3.2±0.1) respondents than in DE (2.8±0.1). Respondents agreed with environmental causes of obesity in all 4 countries. Agreement that obesity is a medical concern was higher in IT (3.5±0.1), SE (3.4±0.1), and DE (3.1±0.1) than in UK (2.9±0.1). Belief that PwO should be blamed was highest in UK (3.4±0.1), lowest in DE (2.9±0.1). Measures of social acceptance varied less among the different countries than attribution of blame. Respondents in IT were more likely to attribute laziness to PwO (3.4±0.1 vs 2.8 to 3.2).

Table 1: Survey Questions

For all Questions (5-point scale): How strongly do you personally agree or disagree with the following statement?
Obesity Narratives
<ul style="list-style-type: none">• Obesity is such a big problem because the food industry sells so much unhealthy food while modern lifestyles make adequate exercise impossible.• Obesity is such a big problem because too many people get hooked on junk food and sugary drinks. They've become addicted and can't help themselves.• Obesity is such a big problem because too many people don't take personal responsibility for eating right and exercising. It's disgusting.• Obesity is such a big problem because too many people get blamed for this disease instead of getting the medical help they need.
Blame
<ul style="list-style-type: none">• A person with obesity is personally responsible for becoming obese.• A person with obesity is not personally responsible for becoming obese.• If a person has obesity, it is their own fault.• If a person has obesity, it is not their fault.
Social Acceptance
<ul style="list-style-type: none">• I wouldn't mind if a person who has obesity married into my family.• I would not like it if a person who has obesity married into my family.• I would avoid talking to a person with obesity if possible.• I would not avoid talking to a person with obesity.• If I were an employer, I would interview a person who has obesity for a job.• If I were an employer, I would not interview a person who has obesity for a job.
Personal Characteristics
<ul style="list-style-type: none">• People with obesity tend to have less self-discipline than most people.• People with obesity tend to have no less self-discipline than most people.• People with obesity tend to be lazier than most people.• People with obesity tend to be no lazier than most people.

Conclusions

Public beliefs associated with WB vary among these four countries. Belief that addictive junk food plays a causative role is widespread and especially strong in Italy and Sweden. Further research is needed to assess changes in these beliefs over time and to assess reasons for the patterns observed here. Understanding these patterns and especially the reasons for them may be helpful for strategies to reduce WB.

Table 2: Survey Sample Characteristics and Mean Responses

	Germany	Italy	Sweden	UK
Sample Size (u)	9,032	10,042	6,000	9,156
Gender				
M	56%	56%	41%	53%
F	44%	44%	59%	47%
Age				
18-24	19%	13%	23%	18%
25-34	22%	21%	24%	20%
35-44	20%	22%	18%	19%
45-54	19%	21%	16%	19%
55-64	12%	12%	13%	14%
65+	8%	10%	6%	10%
Mean Agreement*				
Environment	3.1	3.6	3.6	3.2
Addiction	3.2	3.9	3.8	3.4
Irresponsibility	2.8	3.2	3.3	3.3
Medical	3.1	3.5	3.4	2.9
Blame	2.9	3.2	3.2	3.4
Social Acceptance	3.7	4.1	3.8	3.7
Lazy	2.8	3.5	2.8	3.2
Undisciplined	3.0	2.9	2.9	3.1

*1=strongly disagree, 3=neutral, 5=strongly agree

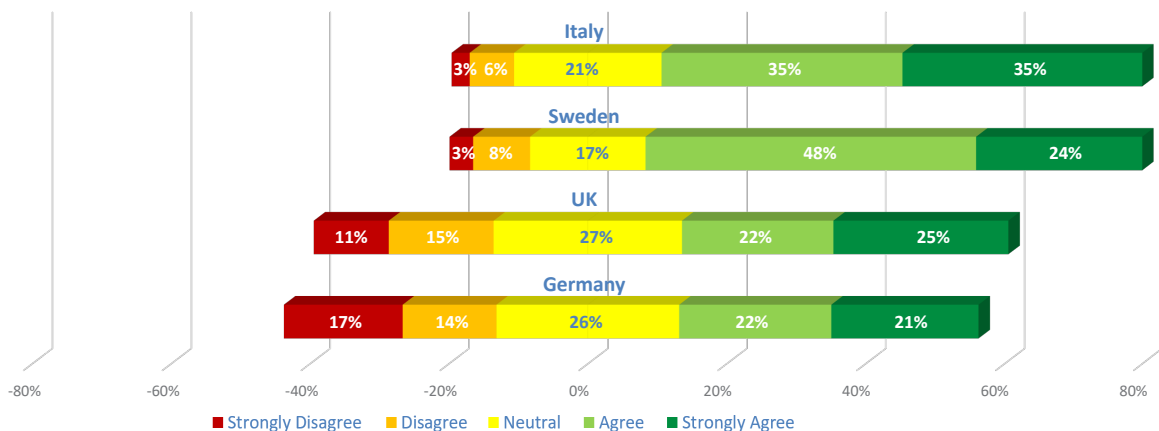
Acknowledgements and References

The authors gratefully acknowledge assistance from Caroline Apovian and Carl-Erik Flodmark in developing this research. This research was funded by the Obesity Action Coalition and made possible in part by a grant to the OAC from Novo Nordisk.

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Figure 1: Addiction Narrative

Agree/Disagree That Obesity Results from Addictive Junk Food



Pearson Chi-Square $p < 0.001$
Statistically significant relationship between country and response

Figure 2: Irresponsibility Narrative

Agree/Disagree That Obesity Results from Irresponsibility

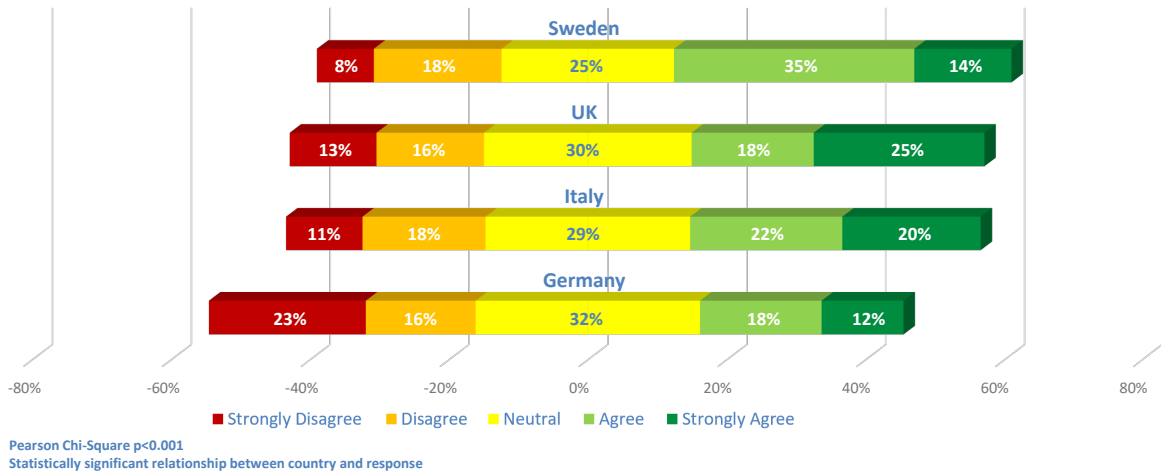


Figure 3: Blame for People with Obesity

Agree/Disagree That People with Obesity Should Be Blamed or Faulted

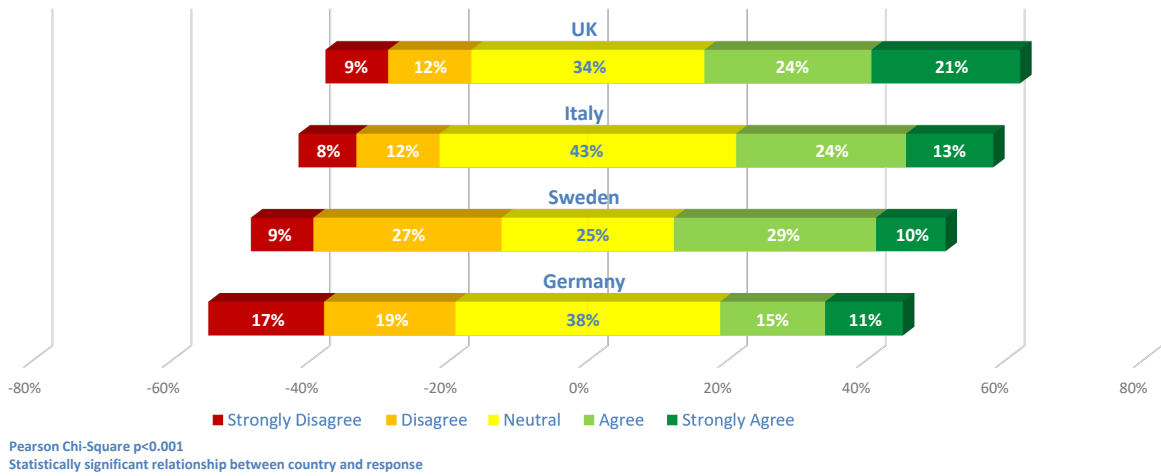


Figure 4: Attribution of Laziness

Agree/Disagree That People with Obesity Tend to Be Lazier Than Most

