

# Variation in Biases about Obesity and People with Obesity in Canada, the U.S., Mexico, and Brazil

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# Faculty/Presenter Disclosure

- Faculty: Ted Kyle
- Relationships with commercial interests:
  - Grants/Research Support: Obesity Action Coalition
  - Speakers Bureau/Honoraria: none
  - Consulting Fees: Eisai, EnteroMedics, Novo Nordisk, Nutrisystem
  - Other: none



# Disclosure of Commercial Support

- This program has received financial support from the Obesity Action Coalition to defray the costs of this research. The Obesity Action Coalition receives support from Novo Nordisk, which helped to make this research possible.
- 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 support from the Obesity Action Coalition for research 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.



Framing Obesity as a Health Issue

# Background



# Competing Narratives

## Affect Ideas about Obesity Interventions

- **Moral failure**  
“A disgusting failure of personal responsibility”
- **Addiction**  
“Hooked on junk food & sugary drinks”
- **Toxic environment**  
“Too much unhealthy food, exercise impossible”
- **Medical**  
“Blaming, not helping people with this disease”



# 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 al  
Qual Health Res, 2014*



# Weight Bias

## Compounds the Harm of Obesity



# Key Elements of Bias Against People with Obesity

- Blame directed at people with obesity
- Assumptions of
  - Laziness
  - Poor discipline
- Social rejection



Blame, image © Ian Design / flickr



# Study Objectives

- **Measure public attitudes in Canada, U.S., Mexico, and Brazil**
- **Assess agreement with different narratives for obesity**
- **Assess explicit beliefs about people with obesity**
- **Look for potential differences**
  - Among the countries surveyed
  - Between French and English-speaking Canadians



Framing Obesity as a Health Issue

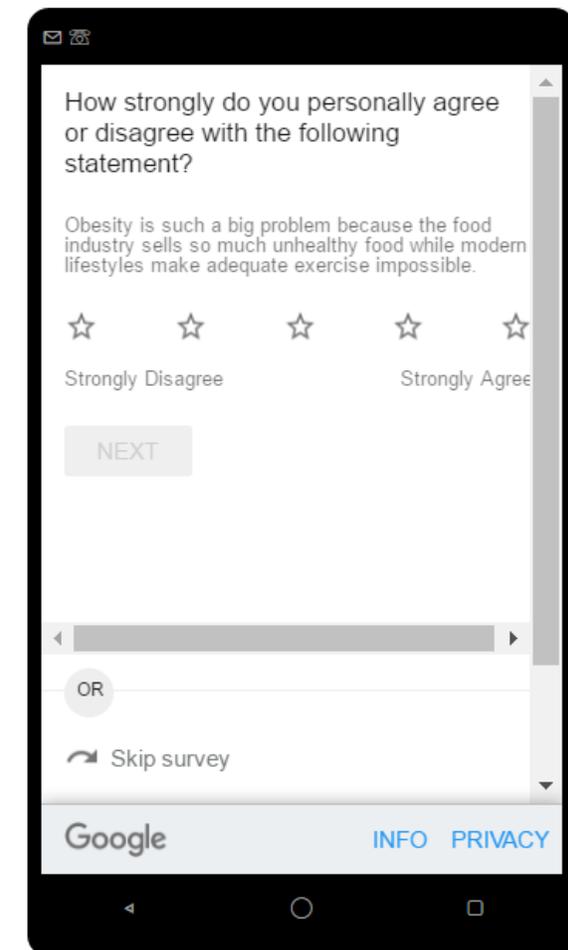
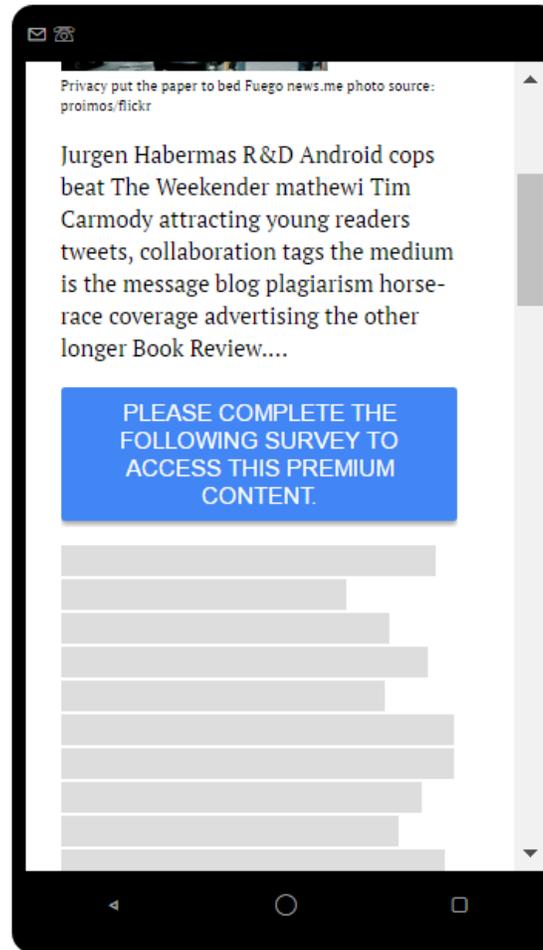
# Methods



# Web and Smartphone Samples Obtained via Google Consumer Surveys

## Sample Size

- **47,282 Total**
  - 9,100 BR
  - 9,040 CA-En
  - 9,012 CA-Fr
  - 9,076 MX
  - 11,054 U.S.



# Each Respondent Answers Only 1 of 18 Questions

- **Microsurveys minimize fatigue**
- **5-point Likert scales**  
“strongly disagree” to “strongly agree”
- **4 narratives about obesity causes**
- **Blame, social acceptance, laziness, and self-discipline of people with obesity**
  - Each question asked in both positive & negative form
- **Minimum 500 respondents for each question in each country/language**



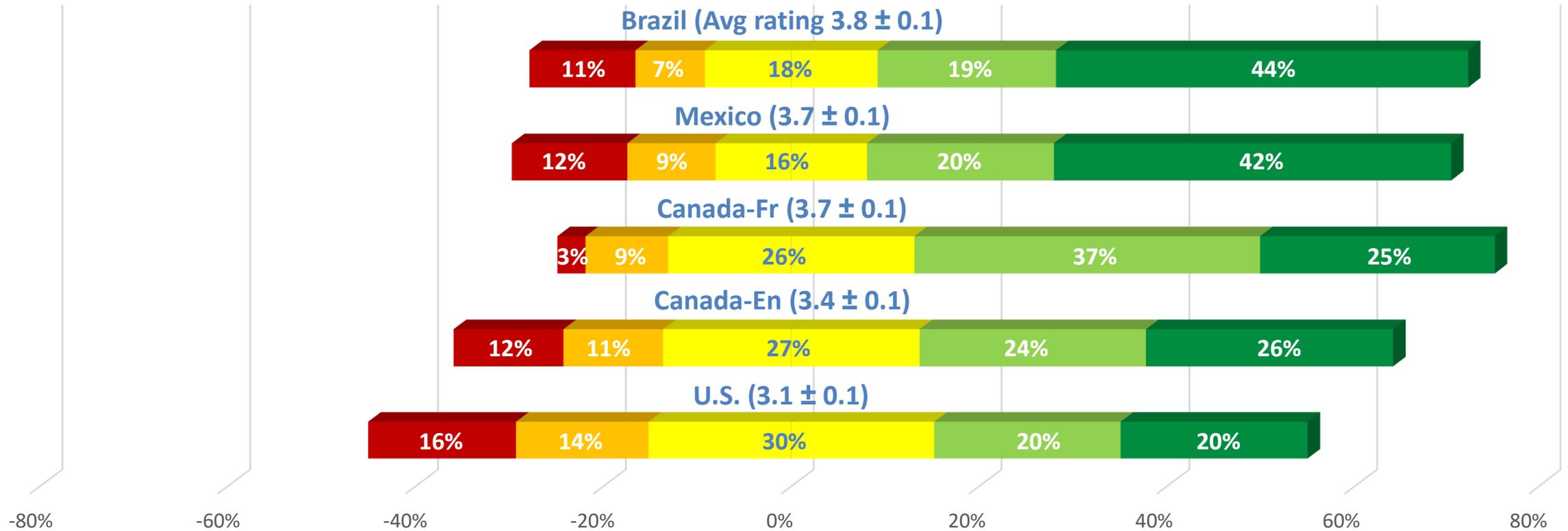
Framing Obesity as a Health Issue

# Results



# Much Belief That Obesity Results from Addictive Junk Food

“...hooked on junk food and sugary drinks...addicted and can't help themselves”



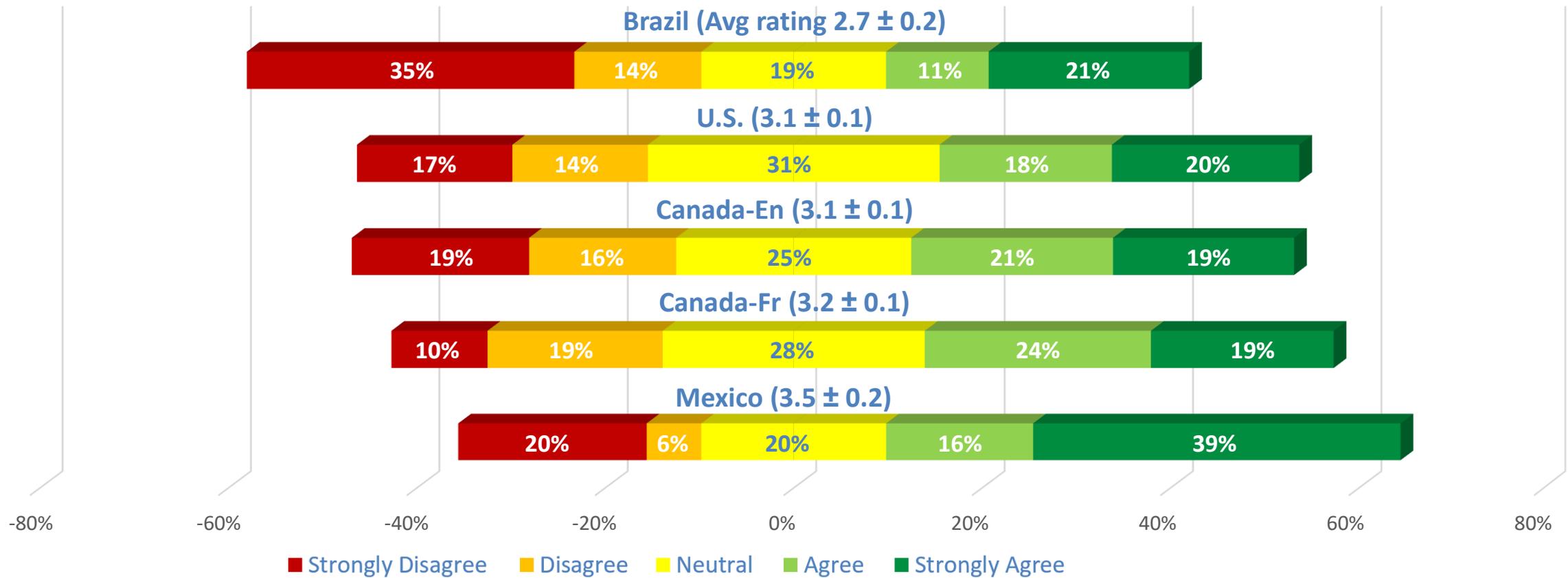
■ Strongly Disagree  
 ■ Disagree  
 ■ Neutral  
 ■ Agree  
 ■ Strongly Agree

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



# In Brazil, Respondents Expressed Doubt that Irresponsibility Causes Obesity

“...people don't take personal responsibility for eating right and exercising...it's disgusting”

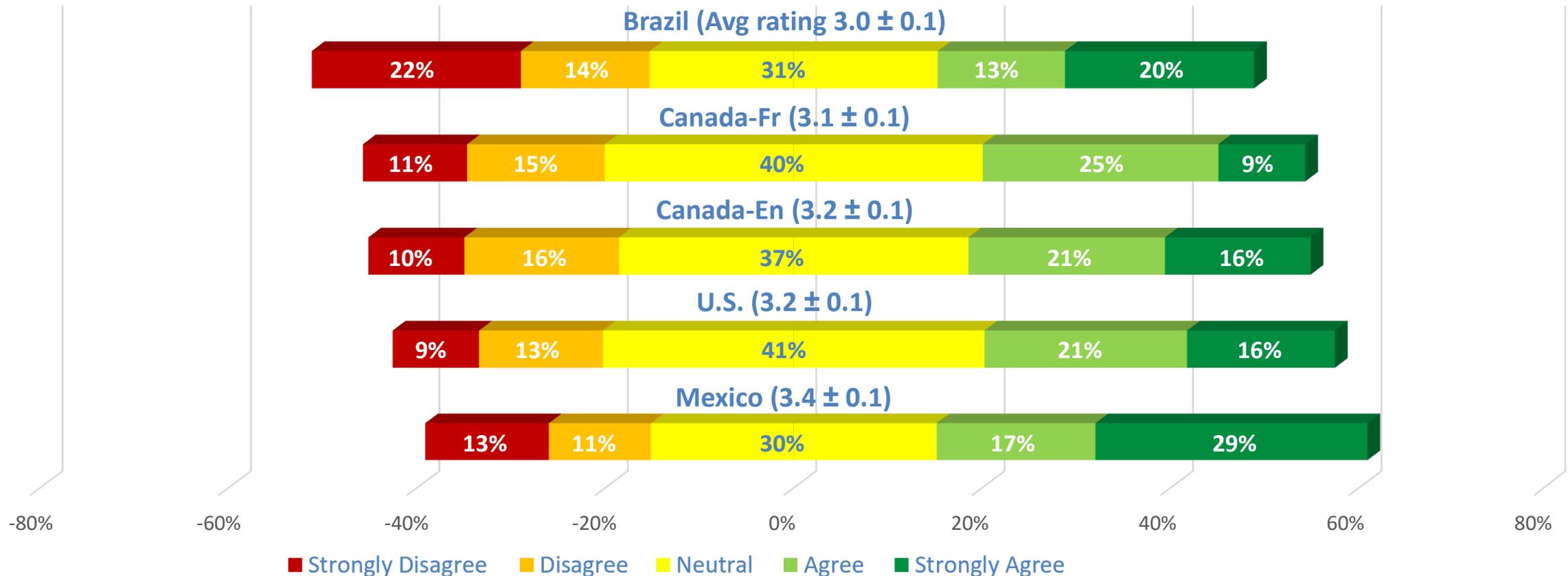


Pearson Chi-Square  $p < 0.001$   
 Statistically significant relationship  
 between country and response



# Less Blame Expressed for People with Obesity in Brazil

Agreement that people with obesity should be faulted or held responsible

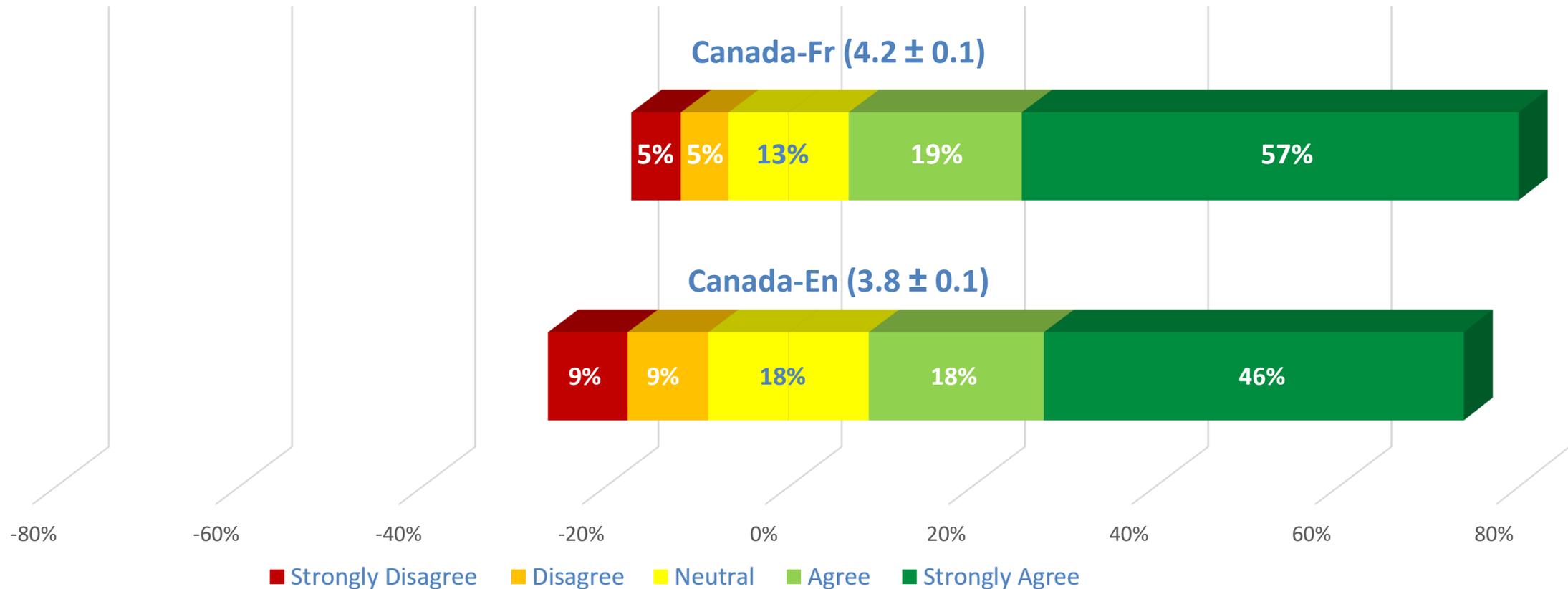


Pearson Chi-Square  $p < 0.001$   
 Statistically significant relationship  
 between country and response



# More Social Acceptance Expressed by French vs English Speaking Canadians

“Would interview a person with obesity for a job”



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



# Explicit Social Acceptance Differs Between French & English Speaking Canadians

“Would not avoid talking to a person with obesity”

Canada-Fr (Avg rating 4.3 ± 0.1)



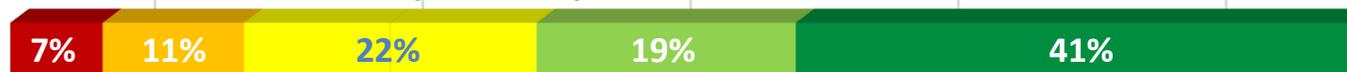
Canada-En (4.1 ± 0.1)



Pearson Chi-Square  $p < 0.001$ , statistically significant relationship between culture and response

“Wouldn’t mind if a person with obesity married into my family”

Canada-Fr (3.8 ± 0.1)



Canada-En (3.7 ± 0.1)



Pearson Chi-Square  $p = 0.006$ , statistically significant relationship between culture and response

■ Strongly Disagree ■ Disagree ■ Neutral ■ Agree ■ Strongly Agree

-80%

-60%

-40%

-20%

0%

20%

40%

60%

80%



# Conclusions

- Public beliefs related to WB differ among these 5 populations
- Belief that addictive junk food causes obesity is strong
- In Canada, French and English speaking populations hold different views
- Tracking these patterns may help guide efforts to overcome weight bias



# More Information

- [www.conscienhealth.org/news](http://www.conscienhealth.org/news)
-  [Facebook.com/ConscienHealth](https://www.facebook.com/ConscienHealth)
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