

ETHICON

THE STIGMA OF OBESITY IN AMERICA: NEW SURVEY FINDS ONE-THIRD OF AMERICANS SAY THEY OR SOMEONE THEY KNOW HAS BEEN “FAT SHAMED” IN LAST YEAR

America’s obesity problem is worse than ever. Nearly 40 percent or 93.3 million Americans now have obesity, according to the latest statistics from the Centers for Disease Control and Prevention (CDC).¹ But while a large portion of the country struggles to lose weight and improve their health, a new national survey conducted by NORC at the University of Chicago and sponsored by Ethicon, finds about a third of Americans also say they or someone they know is dealing with the issue of “fat shaming,” a term that describes the act of humiliating someone based on their weight by making mocking or critical comments about their body size.

The survey found about 85 percent of the public, regardless of their own weight, considers fat shaming to be a serious issue in the United States—48 percent of them consider it to be extremely serious.

Not only does a vast majority think the problem is serious, most think it’s pervasive. Over half (52 percent) believe people with weight problems are “fat shamed” all or most of the time,

¹ <https://www.cdc.gov/obesity/data/adult.html>



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Five Key Findings from The Survey On Obesity Stigma In America ...

- 1) The majority of the public thinks “fat shaming” is a serious issue (84 percent) that is pervasive (52 percent), and about a third of them (34 percent) report that they or someone they know has been affected by it within the last year.
- 2) Nearly 6 in 10 Americans find “fat shaming” is most prevalent in media portrayals, but many feel weight discrimination happens in hiring decisions (29 percent) and in social situations (37 percent).
- 3) More people support diet and exercise alone for severe obesity (93 percent) over weight loss surgery (55 percent), which is generally considered by the medical community to be the most effective long-term treatment for the disease.
- 4) The public is torn over whether obesity is a disease—53 percent say it is, while 46 percent say it’s a lifestyle choice.
- 5) Eighty percent say their opinion wouldn’t change if a friend or relative had weight loss surgery, but 17 percent said it would actually change their opinion for the better.

and 34 percent say they themselves or someone they know has experienced it firsthand over the past year. Among those with obesity, that number rises to 43 percent of respondents.

The greatest percentage of the public (58 percent) feels “fat shaming” or stereotyping of people with obesity is most prevalent in the media, but about a third feel weight discrimination occurs in hiring decisions (29 percent) and in social situations (37 percent). About 1 in 5 feel people with obesity are provided a lower quality of care by doctors and other medical professionals (18 percent) and are paid less or are less likely to be promoted at work (22 percent).

VIEWS OF OBESITY TREATMENTS

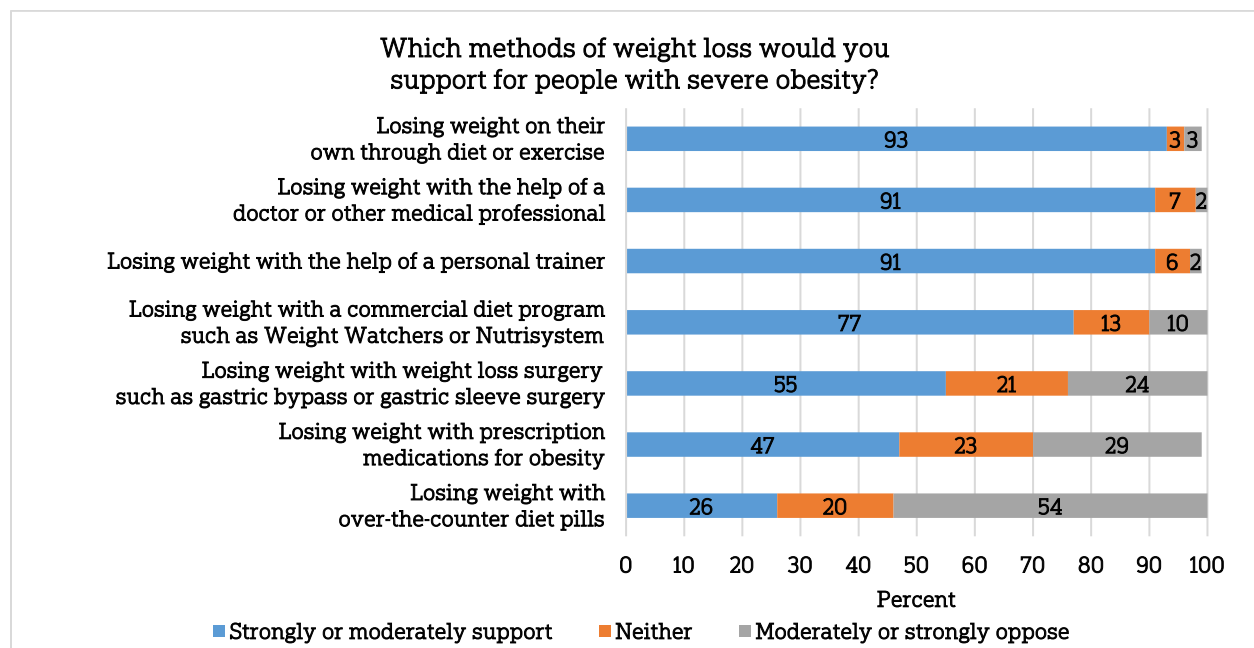
The American public’s views on obesity and fat shaming may be a factor in their perceptions of weight loss methods that go beyond diet and exercise.

When it comes to treating severe obesity, far more Americans endorse the traditional methods of weight loss—diet and exercise only or losing weight with the help of a health professional or personal trainer—than support bariatric or weight loss surgery, what medical experts consider to be the most effective and durable treatment for severe obesity. Nearly a quarter say they would actually oppose a family member’s or close friend’s decision to have weight loss surgery for severe obesity, which for adults means a body mass index (BMI) of at least 35 with an obesity-related condition such as diabetes or a BMI of at least 40.

Less than half support the use of prescription obesity medications, and only a quarter support a friend or family member taking over-the-counter diet pills. In fact, the use of over-the-counter diet pills is opposed by more people than any other weight loss method.

About the Survey

The nationwide survey of 1,059 adults was funded by Ethicon and conducted by NORC at the University of Chicago using AmeriSpeak®, NORC’s probability-based panel. Interviews were conducted September 13-16, 2018, online and using landlines and cell phones. The margin of error is +/- 4.3 percentage points at the 95 percent confidence level among all adults.



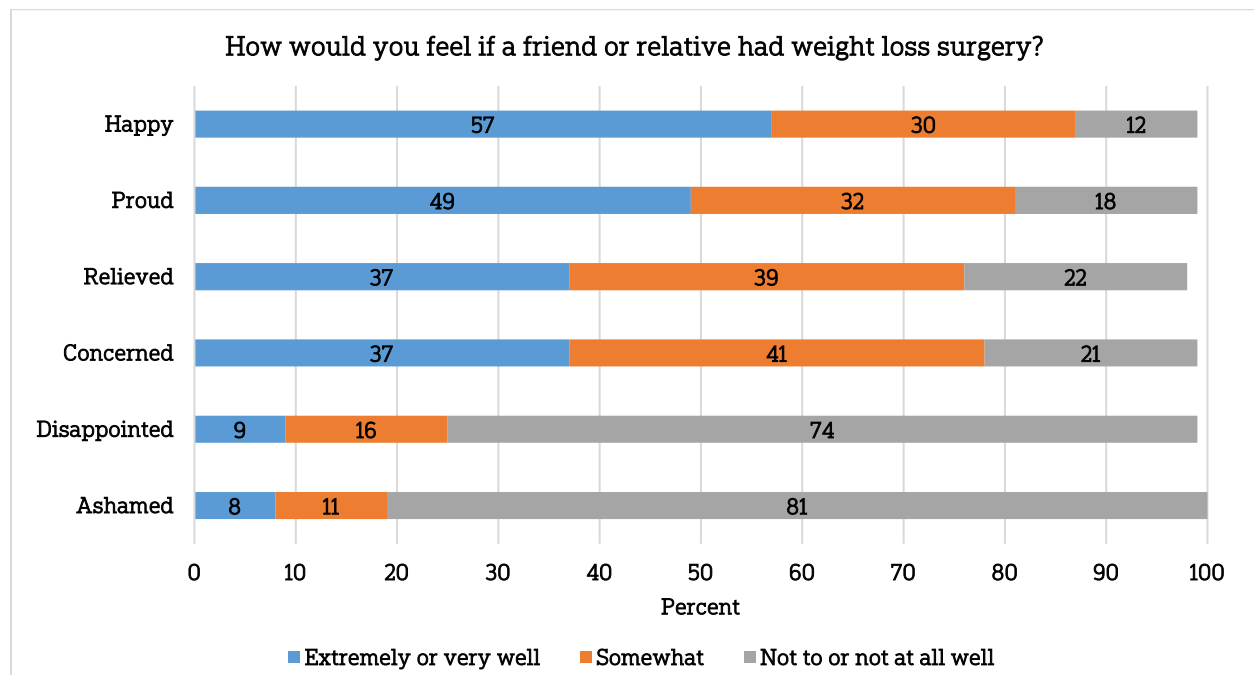
Question: If a family member or close friend with severe obesity decided to lose weight by each of the following methods, would you support, oppose, or neither support nor oppose their decision?

Source: Ethicon obesity survey conducted September 13-16, 2018, with 1,059 adults.

PERCEPTIONS OF SEVERE OBESITY AND WEIGHT LOSS SURGERY

Eight in 10 Americans consider weight loss surgery a medically appropriate treatment for severe obesity, but about 20 percent still view it as a cosmetic procedure. The public is also torn about whether obesity is a disease or not—53 percent think it is, and 46 percent think it's a lifestyle choice, which flies in the face of established medical opinion. In 2013, the American Medical Association, the nation's largest physician group, officially recognized obesity as a disease that requires a range of interventions for treatment and prevention.²

When asked if their opinions would change about a friend or relative who undergoes weight loss surgery, 80 percent of Americans say it wouldn't, 17 percent say it would actually change it for the better, and 3 percent would view it negatively.



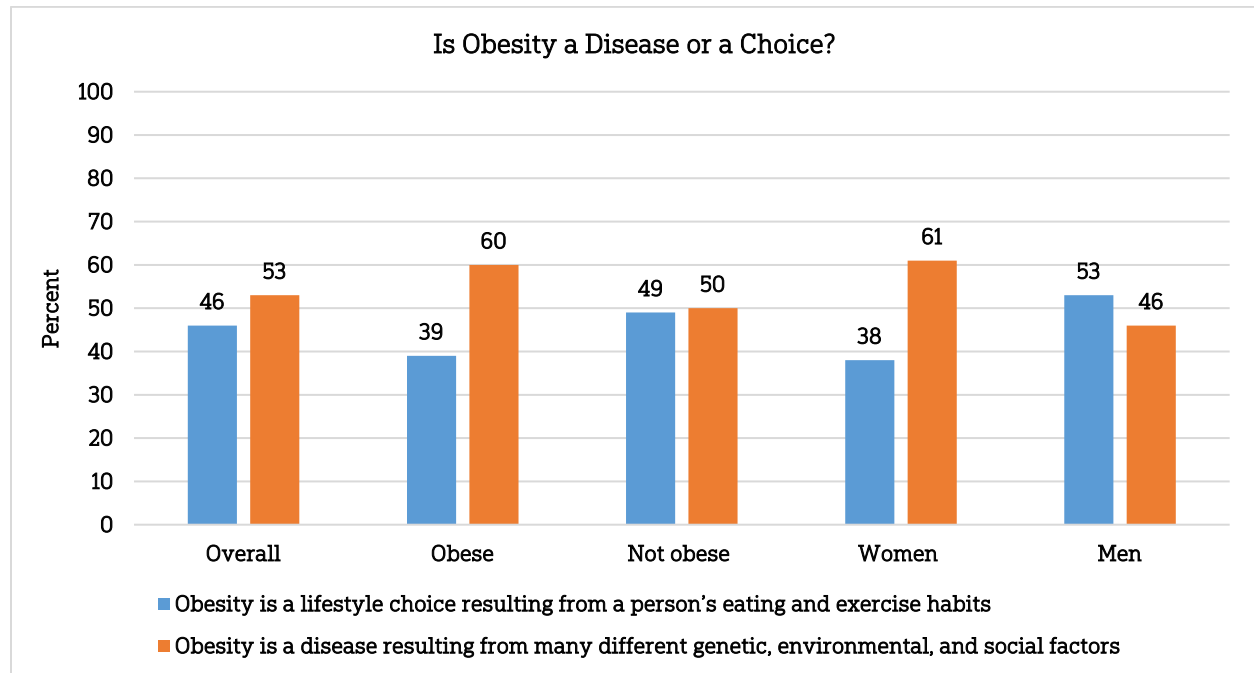
Question: If a family member or close friend with severe obesity had weight loss surgery, how well would each of the following describe how you would feel about it?

Source: Ethicon obesity survey conducted September 13-16, 2018, with 1,059 adults.

² <https://media.npr.org/documents/2013/jun/ama-resolution-obesity.pdf>

OBESITY THE DISEASE AND DISCRIMINATION

While a majority of Americans consider obesity a disease caused by a number of factors, nearly as many say it is a lifestyle choice (53 percent to 46 percent). However, people with obesity (60 percent) and women (61 percent), overall, are more likely to consider obesity a disease.³ The majority of men (53 percent), on the other hand, consider obesity to be a lifestyle choice—46 percent of them thought of it as a disease.



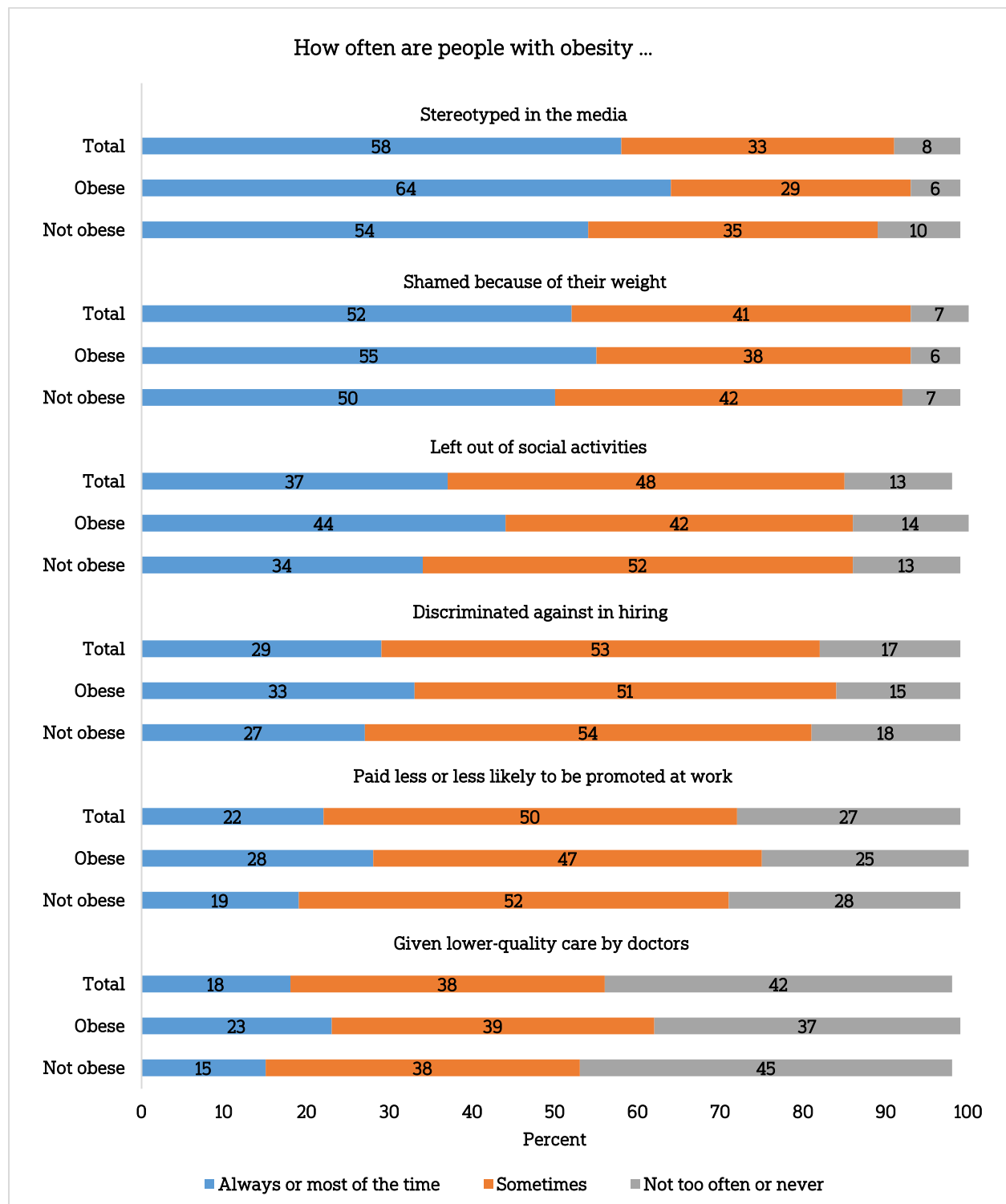
Question: Which statement comes closest to your view of obesity, even if neither is exactly right?

Source: Ethicon obesity survey conducted September 13-16, 2018, with 1,059 adults.

When it comes to discrimination based on weight, 48 percent of Americans say “fat shaming” is currently an extremely or very serious problem in the country, while 37 percent consider it moderately serious. Only 15 percent say “fat shaming” is not a serious problem these days. In fact, 34 percent of adults say that they themselves or someone they know has experienced discrimination because of their weight.

A majority of adults believe that people with obesity are stereotyped in the media or shamed because of their body weight. Fewer say people with obesity are discriminated against or paid less at work. People with obesity are more inclined to perceive these types of inequities.

³ Following the CDC's BMI categories, respondents were classified based on their BMI calculated using their reported height and weight. Underweight people have a BMI under 18.5, healthy weight is a BMI between 18.5 and 24.9, overweight is a BMI between 25 to 29.9, and obese people have a BMI of 30 and above. https://www.cdc.gov/healthyweight/assessing/bmi/adult_bmi/index.html



Question: Because of their weight, how often do you think people with obesity are ... ?
 Source: Ethicon obesity survey conducted September 13-16, 2018, with 1,059 adults.

People who believe obesity is a disease rather than a result of lifestyle choices are more likely to say that people with obesity are stereotyped in the media (64 percent vs. 51 percent), shamed because of their weight (57 percent vs. 45 percent), and paid less or are less likely to be promoted at work (27 percent vs. 16 percent).

STUDY METHODOLOGY

This survey was conducted by NORC at the University of Chicago for Ethicon, Inc. Data were collected using the AmeriSpeak Omnibus®, a monthly multi-client survey using NORC's probability-based panel designed to be representative of the U.S. household population. The survey was part of a larger study that included questions about other topics not included in this report. During the initial recruitment phase of the panel, randomly selected U.S. households were sampled with a known, non-zero probability of selection from the NORC National Sample Frame and then contacted by U.S. mail, email, telephone, and field interviewers (face-to-face). The panel provides sample coverage of approximately 97 percent of the U.S. household population. Those excluded from the sample include people with P.O. Box only addresses, some addresses not listed in the USPS Delivery Sequence File, and some newly constructed dwellings.

Interviews for this survey were conducted between September 13 and 16, 2018, with adults age 18 and over representing the 50 states and the District of Columbia. Panel members were randomly drawn from AmeriSpeak, and 1,059 completed the survey—842 via the web and 217 via telephone. Interviews were conducted in English. The final stage completion rate is 25.5 percent, the weighted household panel response rate is 28.6 percent, and the weighted household panel retention rate is 86.0 percent, for a cumulative response rate of 6.3 percent. The overall margin of sampling error is +/- 4.3 percentage points at the 95 percent confidence level, including the design effect. The margin of sampling error may be higher for subgroups.

Once the sample has been selected and fielded, and all the study data have been collected and made final, a poststratification process is used to adjust for any survey nonresponse as well as any noncoverage or under- and oversampling resulting from the study specific sample design. Poststratification variables included age, gender, census division, race/ethnicity, and education. Weighting variables were obtained from the 2018 Current Population Survey. The weighted data reflect the U.S. population of adults age 18 and over.

For more information, email info@norc.org.

About Ethicon

Ethicon has made significant contributions to surgery for more than 60 years, from creating the first sutures to revolutionizing surgery with minimally invasive procedures. Our continuing dedication to Shape the Future of Surgery is built on our commitment to help address the world's most pressing health care issues and improve and save more lives. Through Ethicon's surgical technologies and solutions—including sutures, staplers, energy devices, trocars and hemostats—and our commitment to treat serious medical conditions like obesity and cancer worldwide, we deliver innovation to make a life-changing impact. For more information, visit www.ethicon.com.

About NORC at the University of Chicago

NORC at the University of Chicago is an independent research institution that delivers reliable data and rigorous analysis to guide critical programmatic, business, and policy decisions. Since 1941, NORC has conducted groundbreaking studies, created and applied innovative methods and tools, and advanced principles of scientific integrity and collaboration. Today, government, corporate, and nonprofit clients around the world partner with NORC to transform increasingly complex information into useful knowledge. NORC conducts research in five main areas: Economics, Markets, and the Workforce; Education, Training, and Learning; Global Development; Health and Well-Being; and Society, Media, and Public Affairs.

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