

Canadian Summit on Weight Bias and Discrimination Summit Report

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Executive Summary

Weight bias and discrimination are widespread and more prevalent than discrimination based on race, gender or sexual orientation. Social consequences experienced by persons with obesity include inequities in employment, barriers in education, compromised care by health care professionals, and negative portrayals of individuals with obesity in the media. In addition, weight bias poses an important barrier in recognition of obesity as a medical condition, provision of equitable access to obesity treatments in the health care system, and is reflected in a broad range of other relevant policy decisions.

The first Canadian Summit on Weight Bias and Discrimination was held in Toronto, ON January 17-18, 2011. The Summit drew a capacity crowd of 150 health professionals, students, policy makers, industry representatives, and educators who heard from an expert panel of eight speakers from across Canada and the United States. Topics included weight bias, bullying, media literacy, mental health, professional education, human rights and complex systems approaches to research and intervention. The summit was co-hosted by the Canadian Obesity Network (CON-RCO) and PREVNet and was supported by grants from the Canadian Institutes of Health Research-Institute of Nutrition, Metabolism and Diabetes, the Public Health Agency of Canada, The Rudd Center for Food Policy and Obesity and Allergan. The purpose of the summit was to raise awareness about weight bias and discrimination as it relates to obesity and its association to the health and well-being of Canadians.

An advisory council of influential leaders and decision makers met during the summit for the purpose of making recommendations for research and action to address weight bias and discrimination in Canada. Based on the evidence the council recommended that weight bias be addressed in the areas of *healthcare, education and public policy*. The Council acknowledged that weight bias is an important issue to address as it creates barriers for those seeking to achieve health and wellness. Key council recommendations in the areas of healthcare, education and public policy include: eliminating weight bias amongst healthcare professionals through quality training programs; infusing weight bias components into existing anti-bullying programs and the Healthy Schools Initiative; acknowledging the Federal, Provincial and Territorial (FTP) declaration on childhood obesity and the FTP framework for health and health promotion and flagging our concern that no messages and activities within the declaration and framework unintentionally promote weight bias; polling Canadians to engage them in a conversation about weight bias with the possible goal of including weight bias in human rights legislation and finally, aligning weight bias research with existing strategic priorities outlined by funders of health and social research.

Summit details and a detailed description of the Summit Advisory Council recommendations are provided in the full report.

The Canadian Obesity Network acknowledges the following individuals for their participation on the Canadian Summit on Weight Bias and Discrimination Advisory Committee. This committee was responsible for the planning of the summit.

1. **Rebecca Puhl**, Director of Research and Weight Stigma Initiatives, Rudd Centre for Food and Policy and Obesity, Yale University
2. **Paul Belanger**, Assistant Director, CIHR Institute of Nutrition, Metabolism and Diabetes
3. **Brigitte LaChance** (Plan d'action gouvernemental de promotion des saines habitudes de vie et de prévention des problèmes reliés au poids, Direction de la prévention des maladies chroniques et des traumatismes) MSSS
4. **Sara F.L Kirk**, Canada Research Chair in Health Services Research, School of Health Administration, Dalhousie University,
5. **Susan Russell and Albert Kwan**, Director, Strategic Issues Management Division, Public Health Agency of Canada (TBC),
6. **Louise Samson**, Science Committee Community Representative, CON-RCO
7. **Arya M. Sharma**, Scientific Director & CEO, CON-RCO
8. **Ximena Ramos Salas**, Network Manager, CON-RCO
9. **Kelly Petrunka**, project coordinator, **Wendy Craig & Debra Pepler** co-scientific directors, PREVNet
10. **Marie-Claude Paquette** , Scientific Advisor, Institut national de santé publique du Québec) and Associate Professor at the Université de Montréal
11. **Diane Finegood** Professor, Simon Fraser University and Executive Director The CAPTURE Project
12. **Irving Gold** Vice President, Government Relations and External Affairs for the Association of Faculties of Medicine of Canada
13. **Mary Forhan**, Project Coordinator, CON-RCO

The following individuals are acknowledged for their contributions to the summit: Dawn Hatanaka, Education Director, CON-RCO; Brad Hussey, Public Relations and; Rehana Malik-Mbanga, Education Project Manager, CON-RCO

Background

Individuals with obesity are highly stigmatized and face multiple forms of prejudice and discrimination because of their weight (MacLean, Edwards, Garrard, Sims-Jones, Clinton & Ashley, 2009). The prevalence of weight discrimination in the United States has increased by 66% over the past decade, and is comparable to rates of racial discrimination, especially among women (Rudd Centre for Food Policy & Obesity). Weight bias translates into inequities in employment settings, health-care facilities, and educational institutions, often due to widespread negative stereotypes that overweight and obese persons are lazy, unmotivated, lacking in self-discipline, less competent, noncompliant, and sloppy (Puhl & Chelsea, 2010). These stereotypes are prevalent and are rarely challenged in Western society, leaving persons who are overweight and who have obesity vulnerable to social injustice, unfair treatment and impaired quality of life as a result of substantial disadvantages and stigma. Weight bias is well documented across a wide range of settings:

Employment: Recent survey and population-based studies show high percentages of workers with obesity perceive consistent weight-based disparities in employment settings. Their perceptions are supported by large-scale studies documenting lower wages for persons with obesity and experimental research demonstrating that job applicants who are overweight experience discrimination in hiring and employment decisions.

Health Care Settings: Recent studies confirm that patients with obesity encounter prejudice, ambivalence, and often unsatisfactory treatment in health care environments. It is possible that a lack of professional training and effective strategies for weight management lead providers to become frustrated and in turn form negative attitudes about patients with obesity. Specifically, research is needed to determine the most effective ways to educate providers about weight bias in health care, dispel damaging obesity stereotypes, and to promote strategies to improve patient care.

Educational Settings: Research continues to suggest that students who are overweight or have obesity face significant obstacles to educational achievement throughout their educational careers. However, this issue remains understudied and additional work is needed to assess the nature and prevalence of weight bias among educators and its impact on the educational achievement of students who are overweight or have obesity.

Inter-Professional Relationships: Individuals with obesity, particularly women, appear to experience weight bias and negative stereotypes in a range of interpersonal relationships. Additional research is needed to determine the nature and extent of weight bias in social relationships and to better understand how weight bias mediates the relationship between obesity and dissatisfaction with interpersonal relationships. A better understanding of how these variables impact the emotional well-being of individuals with obesity is also needed.

Media and Advertising: The media is a striking illustration of the social acceptability of weight-bias. Whether it is situational comedies, cartoons, movies, advertisements or news

reports, the media is not kind to persons who are overweight. In the past year alone, high profile news reports have held obese persons partially responsible for rising fuel prices, global warming and causing weight gain in their friends. Furthermore, persons who are overweight remain one of the last acceptable targets of humour and ridicule in North American television and film.

Legislation: Although lawsuits alleging weight-based discrimination appear to be increasing, individuals who are overweight or have obesity are alone and face significant obstacles in their efforts to seek amends in court for wrongful discrimination. Due to the lack of human rights legislation expressly prohibiting weight discrimination, individuals must bring suit under existing laws on the basis of other enumerated characteristics. Thus, with the exception of a few individuals who have filed claims and whose body weight qualified them as “disabled”, employers continue to be free to discriminate against job applicants or employees on the basis of weight.

Other Areas: Subtle and covert forms of interpersonal discrimination may be common experiences of persons with obesity in typical activities of daily living. More work is needed to examine weight bias in customer service interactions. In addition to public accommodations and other domains previously mentioned where persons with obesity may be disadvantaged. Addressing these understudied areas of weight bias will be important to obtain a comprehensive understanding of the multifaceted experiences of overt and covert forms of discrimination faced by persons with obesity.

Health Consequences of Weight Bias and Discrimination

Weight bias has concerning implications for psychological well-being of individuals with obesity and may increase vulnerability to low self-esteem, poor body image, depression, and other psychiatric disorders. Strategies used to cope with weight bias may also affect emotional outcomes. The existing evidence is sufficient to challenge common perceptions that stigma may motivate health eating behaviours and instead suggests that bias may increase maladaptive eating behaviours, exercise avoidance, and in some cases, reduce motivation to lose weight. These sobering findings paint a distressing picture for individuals struggling with excess weight who are surrounded by significant societal stigma and its consequences. With no systematic support and little public attention to the issue of weight bias, individuals with obesity are primarily left on their own to confront and cope with ongoing injustice.

In 2009, the *Canadian Obesity Network-Réseau canadien en obésité (CON-RCO)* identified addressing weight bias and discrimination as a strategic priority toward reducing the mental and physical burden of obesity on Canadians. One of the first strategic activities that the CON-RCO Board of Directors and Science Committee recommended was a workshop where leading Canadian and international representatives from relevant disciplines (health researchers, employers, health professionals, funders, policy makers, insurance, law, ethics, advocacy groups) and experts on addressing discrimination and bias in other disciplines (gender, race, mental health, HIV/AIDs,

bullying etc) would come together to discuss the issue of weight bias and discrimination in Canada.

The objectives of the summit were to:

1. Review the state of evidence in the area of weight bias and discrimination
2. Learn about best practices and lessons learned from other disciplines such as gender, race, mental health, HIV/AIDS, etc
3. Develop recommendations for research and action that will address weight-bias and discrimination in Canada.

Overview of the Summit

Partnerships and Funding

On January 17 2011 CON-RCO hosted a one day summit in partnership with PREVNet. The summit was supported by funding provided by a knowledge translation grant from the Canadian Institutes of Health Research-Institute of Nutrition, Metabolism and Diabetes and education grants from the Public Health Agency of Canada, the Rudd Center for Food Policy and Obesity and Allergan Inc. Additional costs associated with the summit were offset through participant registration fees set at \$150 per person. Fifty complimentary student registrations were available on a first come, first served basis. The summit took place at the Saint Lawrence Hall in Toronto ON.

Summit Registrants

The summit was advertised on the CON-RCO website. A link to the summit event page on the CON-RCO website was distributed by our partners and advisory committee members and to all members of CON-RCO. Participant registration met the capacity of the venue set at 150 people including students. Registration was at capacity one week prior to the summit. Registrants identified themselves as policy makers, health advocates, researchers, nurses, rehabilitation specialists, dietitians, physicians, industry representatives, lawyers and educators. Registrants came from across Canada and the United States.

Summit Content

On January 17 2011, A panel of eight speakers (Appendix A) with expertise in the areas of weight bias, living with obesity, media literacy, mental health promotion and eating disorders, bullying, human rights, health psychology and health research presented key evidence in the areas of weight bias and discrimination to an audience of 150 people. Presentations were scheduled for the morning of the summit with the afternoon reserved for a panel discussion with the audience (Appendix B). At the time of registration, participants were given the opportunity to submit statements about weight bias and discrimination that could be presented at the summit. However, no statements were submitted so the time allotted in the schedule was opened for panel discussions and more

time for audience questions. The summit was moderated by André Picard who was hired through the National Speakers Bureau.

Speakers were asked in advance by the Summit Advisory Committee to address key points associated with weight bias and discrimination in their area of expertise. All presentations and the panel question and answer session were recorded and with the exception of the talk given by Dr. Gail McVey are available to view from the CON-RCO website (www.obesitynetwork.ca). Dr. McVey's slides refer to results from research studies that have not been published and therefore are not available for viewing by a broader audience at this time. A summary of the presentations is found in Appendix A.

Council Meeting

A Summit Advisory Council was created specifically for this summit for the purpose of making recommendations to address weight bias and discrimination related to obesity in Canada. Council members were asked to participate based on their experience as opinion leaders and policy makers and for representation of groups affected by weight bias including children and women. A list of council members and their biographies is found in Appendix C. Please note that Ben Barry from the Ben Barry Agency had to withdraw as a council member the day of the summit due to illness.

Council members were provided with information and reading packages one month prior to the summit. These packages provided background summaries about weight bias and discrimination and the purpose of the summit. Recommended readings were provided by the speakers which provided more detail on the key points they presented at the summit.

All council members attended the summit on January 17 to listen to the speakers, comments from the audience and to ask questions of the speakers. The Council met in a closed meeting facilitated by Rebecca Puhl and Arya Sharma from 5pm-9pm on January 17th and from 8:30am-11:30pm on January 18th. Council meetings took place in a meeting room at One King West Hotel and Residence in Toronto.

The purpose of the council meeting was to:

- 1) Identify ways to **increase attention** to weight bias in Canada
- 2) Identify strategies to **reduce bias** in Canada
- 3) Identify **specific actions** that need to be implemented to achieve these goals.

The Council began by identifying some of the common themes, messages and concerns raised from the presentations, readings and registrant comments. There was some question as to whether focusing on weight bias would undermine public health messages that aim to reduce the prevalence of obesity. The Council discussed this issue at length and agreed that reducing obesity rates requires individual change and what the Council needed to focus on was sustaining the public health message about obesity as a health condition while at the same time addressing weight bias issues. Including weight bias as a priority issue in the context of reducing the health and social consequences associated with obesity has proven to be a successful strategy for the Rudd Center on Food Policy

and Obesity and the CON-RCO Board of Directors supports this approach. The role of CON-RCO is to engage its partners to disseminate multiple messages about weight bias.

Opportunities to leverage the message of weight bias were identified by the Council. These included the existing partners of CON-RCO such as the Canadian Teachers Federation, Girl Guides of Canada, PREVNet, Ontario Mental Health Coalition, the National Eating Disorder Information Centre, and the Rudd Center for Food Policy and Obesity. A unique opportunity in Canada exists with the “Declaration of Prevention and Promotion from Canada’s Ministers of Health and Health Promotion/Healthy Living”. A vision of promoting health and preventing disease and disability is outlined in the declaration with recognition that actions within and outside of government are needed to promote the health of Canadians. The Council members recognize an opportunity to include messaging about weight bias in the same way. An opportunity to address weight bias as it relates to children and childhood health is available through the “Federal, Provincial and Territorial (FTP) Framework for Action to Promote Healthy Weights”.

Based on the evidence provided by the review of the literature on weight bias and discrimination, the content of the presentations at the summit and comments from the registrants, the Council identified the following areas to focus on:

- Healthcare
- Education
- Policy

The Council decided that it was important to focus action plans on these three key areas as they were common themes threaded throughout the literature, speakers’ presentations and questions and comments from summit registrants. The Council recommended actions that have both high impact and high feasibility. Based on this classification, educating the *general public* about weight bias was not viewed as high impact, high feasibility and therefore not recommended as a role for CON and its partners.

Healthcare

The primary objectives in healthcare were to eliminate weight bias as exhibited by many health professionals and to provide health professionals with effective tools through which they can promote a constructive and healthy approach to weight management. The Council was struck by the evidence that patients with obesity experience barriers to accessing healthcare due to the attitudes and beliefs of health professionals. The Council commented on the level of interest and participation by health professionals at the summit and the reports from the Rudd Centre for Food Policy and Obesity and the Canadian Obesity Network which show health professionals are aware of their bias and want to address it. Themes throughout the summit and in the literature highlight the level of frustration which health professionals report due to a perceived lack of effective interventions when treating the obese patient. The Council agreed that healthcare was an area in which CON-RCO should take an active role given the high proportion of health

care professionals, professional associations and industry members in its network. There are opportunities to amplify the message of weight bias through training and networking.

The Rudd Centre for Food Policy and Obesity has developed and evaluated weight bias curricula. These resources are available for healthcare providers and may be included as continuing medical/professional education credits for some disciplines. CON-RCO has developed and conducted a Preceptorship Program for primary health care teams across Canada. These continue to be available. CON-RCO has a rich network of members with leadership positions at academic institutions for which messages about weight bias can be developed and included in relevant curricula. Existing curricula could be adapted or expanded to include "quality of care" training in weight bias.

The training and continuing education of health professionals is generally monitored and supported by professional associations. Health professional associations from a range of disciplines are currently partners with CON-RCO. It is recommended that CON-RCO engage the professional associations to address weight bias within their organizations through continuing professional education. It was also suggested that professional organizations be supported to come together to have a common position statement about the effects of weight bias on health and well-being.

Industry partners including pharmaceutical and medical supply companies are often looking for ways in which to become involved with CON-RCO. They might be encouraged, as part of their corporate social responsibility mandates, to take up the issue of weight bias.

It was suggested that weight bias could impact on how standards are set for weight management products and on how these products are used. The Council suggested that CON-RCO bring this concern to the attention of Health Canada. The Council also suggested that CON-RCO support monitoring of the weight loss industry, particularly around advertising weight loss claims, using the guiding principle of "do no harm".

Education

The evidence supporting the association of weight bias and bullying amongst children, youth and adults was overwhelming and identified as a priority area by the Council. Of particular importance were the reported health issues attributed to bullying. The Council recommended that CON-RCO work with PREVNet to include weight bias components in existing anti-bullying programs. Such programs are offered in schools from primary to secondary institutions and through organizations including Girl Guides of Canada and the Boys and Girls Clubs and Big Brothers, Big Sisters. It was recommended that weight bias be presented in the context of the Healthy Schools Initiatives and presented to the Council of Ministers of Education of Canada (CMEC) linking weight bias and health consequences. It was suggested by the Council that by engaging CMEC there is greater potential to attract the attention of every Ministry in Canada with an interest in obesity and weight bias. It was recommended that CON-RCO work with PREVNet to conduct a scan of resources and identify gaps in the area of weight bias resources for use by

educators. The Healthy Schools Initiative could benefit from the development of a web-based module or synchronous session, such as a webinar, about weight bias along with resource packages that educators can use in the classroom. Similar resource packages could be developed for use by teachers, deans of faculties of education, home, school and parent councils. The Canadian Teachers Federation was also identified as a potential partner in such activities. CON-RCO could be the central depository for resources for educators in Canada.

The Mental health commission of Canada has funded a national coalition which will survey school boards on resources for mental health. Although weight bias is not currently identified by this group as a variable to consider in the area of mental health, it could be opportunities to have a weight bias expert join the coalition.

Public Policy

The Council recommended that CON-RCO acknowledge and endorse the FPT framework and declaration for health and health promotion. Results from the summit and review of the literature indicate that weight bias could be a barrier to achieving the goals and objectives of the framework. The Council recommended that CON-RCO encourage governments to ensure that weight bias is not enhanced by the actions and strategies proposed in the declaration and framework. To this end, policies and actions need to be free of any messaging that unintentionally could promote discrimination against persons with obesity.

It was acknowledged that weight bias is a barrier to individuals taking personal responsibility for their weight/health which in turn can increase health care costs. Dealing with weight bias effectively could decrease health care costs over time.

The Council identified that human rights legislation could be an important lever to bring about change in the area of weight bias. However, there is need to do further research, analyse existing and on-going litigation and case law to build the rationale to include weight as an enumerated ground under human rights legislation.

An immediate action suggested by the Council was to survey Canadians about weight bias. Lessons learned from initiatives in the United States, primarily from the Rudd Center, indicate that public support for weight bias strategies exists. The landscape is probably similar in Canada but survey work should be done to determine the level of Canadian's awareness of weight bias and strategies to eliminate it.

Opportunities exist within federal, provincial and private sector agencies to fund research in the area of weight bias. The Council recommended that as a network, CON-RCO, inform its members interested in weight bias of possible funding sources.

Overall Summary of Council Recommendations

The Summit on Weight Bias and Discrimination was held to understand more about how weight bias gets in the way of addressing obesity as a health and social concern. The evidence on the economic and health impacts of obesity is of importance to Canadians and therefore the time is right to make Canadian's aware of the importance of weight bias as a barrier to better health and potentially lower costs in their health care system.

The council decided to focus on three areas based on the evidence. These areas are: healthcare; education and; public policy.

In the area of healthcare the council agreed that a primary and long-term objective is to reduce weight bias from all health professionals and provide them with effective tools (which it appears they will be receptive to) to address obesity. Strategies in the area of healthcare will focus on training and education of health professionals that includes topics associated with weight bias. Similar objectives in the area of healthcare are recommended for the pharmaceutical and medical device industry and also the diet industry. Eliminating bias in all sectors of the healthcare system will reduce barriers to addressing issues associated with obesity. The council agreed that it would be a major accomplishment for CON-RCO and its partners to have an impact on changing the attitudes and beliefs of health professionals.

In the area of education the council learned that weight bias is a primary cause of bullying and is associated with health consequences to the extent that bullying is labelled a public health problem. The council has therefore recommended that CON-RCO will work with partners in the area of anti-bullying strategies and education to influence the effective weight bias components in all anti-bullying programs that exist in schools and community organizations. It is also recommended that CON-RCO provide a network of support to infuse messages about weight bias in the Healthy Schools Initiatives. For example, to engage with the Rudd Center and PREVNet to develop webinars for the Healthy Schools Initiative. The council has also recommended that CON-RCO acknowledge the FPT Framework and Declaration for Health and Health Promotion and enable a network of support to take the framework which specifically targets childhood obesity to the CMEC. It is the responsibilities of the schools to adopt the healthy schools initiative. The council has also recommended that weight bias can be addressed in the context of bullying and mental health which fits nicely with the mental healthcare supports currently being promoted within the schools.

Public policy was the third area identified by the council in which to address weight bias. The council agreed that it would be strategic and appropriate to tie policy initiatives to address weight bias in Canada to the FPT Framework and Declaration on Health and Health Promotion. Weight bias initiatives tied to this widely recognized framework will garner attention from medical and health professional schools and hospital administrators. Presenting weight bias as a barrier to achieving the goals and objectives of the framework is an important area for policy makers to be aware of. Addressing statements or activities in the framework that could enhance weight bias and thereby

enabling a person's access to choices to address obesity could positively affect the health of Canadians who are trying to find help.

As a network which includes graduate students and researchers the council has recommended that CON-RCO identify strategic directions and objectives of existing funding resources to which weight bias can be addressed. Such opportunities should be made known to members of the network who have identified interest in exploring issues associated with weight bias.

Human rights were identified as an important lever to make change in weight bias. However with expert input, now is not the time. Case law is building rapidly. CON-RCO hopes that they will be able to mount a Canadian poll to engage Canadians about the issue of weight bias and gather evidence about its importance.

The council adjourned with all members offering their support to move action items forward.

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Speaker Biographies/Presentation Summaries

Rebecca Puhl- Key Note Address

Dr. Rebecca Puhl is Director of Research and Anti-Stigma Initiatives at the Rudd Center for Food Policy and Obesity at Yale University. She is responsible for identifying and coordinating research and policy efforts aimed at reducing weight bias, and improving the quality of life of children and adults affected by obesity. Dr. Puhl was born and raised in Canada. Dr. Puhl received her Ph.D. in Clinical Psychology from Yale University and has been a Research Scientist at Yale since 2005. Dr. Puhl has been conducting research on the topic of weight bias and prejudice for twelve years, and has published a range of experimental studies, population-based studies, review papers, and chapters on this topic. Her recent publications address the prevalence and origins of weight stigma, interventions to reduce weight bias, and the impact of weight stigma on emotional and physical health. She has presented on these topics to academic, professional, and community groups across the United States and internationally. Her research has received national and international media attention, including appearances on The Today Show, Good Morning America, CNN, BBC, Al Jazeera, and coverage of her work in New York Times, The Washington Post, Time Magazine, Wall Street Journal, USA Today, Newsweek and multiple other news sources. Dr. Puhl serves on the Council of The Obesity Society and is chair of the Weight Bias Task Force, and is an editor of the book *Weight Bias: Nature, Extent, and Remedies* (Guilford Press, 2005).

Dr. Puhl opened the summit with a keynote address. She reviewed the current evidence on weight bias as an issue that impacts health and wellness, employment, and access to health care. Dr. Puhl highlighted ways in which the media perpetuate weight bias through misrepresentation of persons with obesity in television and through the use of human torsos' that are often "headless" leading to the dehumanization of obese bodies. Dr. Puhl urged audience members to raise weight bias as an issue to policy makers and move the emphasis on obesity reduction to health and away from appearance. She recommended that employers, media and education be targeted for messages to address weight bias. Dr. Puhl suggested that such messages could be embedded into existing anti-bullying strategies. Dr. Puhl stated that we need to fight obesity, not people and that more funding and support for research in the area of weight bias and discrimination is needed.

David Dolomont: Patient perspective

David has lived with obesity since childhood. He is an active family member and community member. David works full-time with experience in teaching and education at a corporate level. David has made efforts to live well and pursue health. David generously offered to speak at the summit to share his personal experiences living with obesity and the associated bias and discrimination he has encountered. David described his experiences throughout childhood and adulthood which clearly highlighted bias within families, the general public, teachers, employers and healthcare professionals.

David spoke candidly to the summit participants and challenged the council to include the patient perspective in recommendations to address bias and discrimination in Canada.

Matthew Johnson

Mr. Johnson is the Director of Education at the Media Awareness Network. He creates resources for educators, parents and community groups. He is the designer of *Passport to the Internet*, MNet's comprehensive digital literacy tutorial for Grades 4-8. Mr. Johnson also writes the Talk Media blog, one of the most popular sections of the MNet Web site, where he has written on a wide variety of subjects, including a six-part series on the history and future of Web 2.0 He has given presentations and interviews to parents, school, community and industry groups on topics such as the effect of media violence on children, video game addiction, alcohol advertising, children's use of new media and the moral dimensions of computer games. Mr. Johnson is an educator with nearly ten years' experience teaching media education, film-making, English and special education among other subjects. His experience also includes award-winning work as a writer of prose, plays and radio and television scripts and he recently released his first novel, *Fall From Earth*, with publisher Bundoran Press. His experience also includes award-winning work as a writer of prose, plays and radio and television scripts and he recently released his first novel, *Fall From Earth*, with publisher Bundoran Press.

Mr. Johnson presented and discussed evidence on the role of the media consumption and its impact on obesity. He also discussed the ways in which media consumption contributes to body dissatisfaction and the stigma associated with larger than typical body sizes and shapes. Mr. Johnson appealed to the participants at the summit to consider evidence to inform public health initiatives that address media consumption and obesity and strategies to positively impact media consumption to enable the development of positive body image and reduce weight related prejudice.

Gail McVey

Dr. McVey is a Psychologist and Health Systems Research Scientist in the Community Health Systems Resource Group at The Hospital for Sick Children, Director of the Ontario Community Outreach Program for Eating Disorders and Associate Professor in the Dalla Lana School of Public Health at the University of Toronto. She has published studies on longitudinal research involving school-based prevention programs designed to promote wellness and prevent disordered eating among children and youth. She currently holds a 5-year Mid-Career Investigator Award funded by the Canadian Institutes of Health Research and the Ontario Women's Health Council to study ways to effectively roll out prevention work with individuals across the lifespan. Dr. McVey leads a provincial training program in the treatment and prevention of eating disorders in Ontario in partnership with the Eating Disorder Programs at SickKids' Hospital and the University Health Network. Her research and community-based training bring her into close contact with members of government, parent representative groups, school boards, public health agencies, coalitions, and other community-based organizations. She recently co-hosted national and international symposia with stakeholders from research, practice and policy to investigate ways to align prevention efforts across the fields of

eating disorders and obesity, earning an award for most outstanding continuing education activity in psychiatry in Canada (academic) by the Joint Canadian Psychiatric Association and the Council of Psychiatric Continuing Education (together with colleagues Drs. Carol Adair, Lindsay McLaren, Janet de Groot, Ron Plotnikoff, and Katherine Gray-Donald from the Universities of Calgary, Alberta and McGill). Gail is also the recipient of the Ontario Mental Health Foundation Paul Christie Memorial Prize in recognition for outstanding research in the field of mental health research.

Dr. McVey summarized the evidence of the association of the experience of stigma on mental health and well-being throughout the lifespan. She also summarized evidence on effective training programs that aim to change attitudes and beliefs of health professionals to reduce the stigma and bias experienced by clients in the health services system.

Wendy Craig

Dr. Craig is a Professor in the Department of Psychology at Queen's University. In 1993, Dr. Craig received her Ph.D. in Clinical-Developmental Psychology from York University. Her research program focuses on three areas. The first examines healthy relationships among children, adolescents, and adults. The second addresses the risk and protective factors associated with bullying and victimization in family, peer, individual, school, and social relationships. The third research program addresses the development of aggression in females as demonstrated in romantic relationships, dating violence and young girls with behavior problems.

In recognition of her work on bullying and victimization, Dr. Craig won an Investigator Award from the Canadian Institute of Health Research. Dr. Craig regularly speaks to parents and educators. She has published widely on topics of bullying and victimization, peer processes, sexual harassment and aggression in girls. She was editor of a volume on childhood social development. Dr. Craig has co-authored two books on Juvenile Delinquency and Social Development as well as numerous book chapters and articles. As a Canadian representative, Dr. Craig works with the World Health Organization and UNICEF conducting research and promoting healthy relationships. She recently wrote a chapter on bullying and fighting for the World Health International Report for the World Health Organization. She is an international leader in research on bullying.

Dr. Craig summarized the evidence which clearly demonstrated the association of bullying and obesity. She discussed issues associated with gender bias, bullying behaviour and appealed to participants to consider bullying behaviours as both a cause and consequence of weight bias and prejudice.

Shaheen Azmi

Dr. Shaheen Azmi is a part-time instructor in the Department of Politics and Public Administration at Ryerson University where he teaches a course on human rights and equity. He is also an Adjunct Scholar at the Multicultural History Society of Ontario,

University of Toronto, where he has been engaged in number of projects. Dr. Azmi has worked at the Ontario Human Rights Commission since 1999, and currently is the acting director of the Policy Education, Monitoring and Outreach Branch. In addition to a PhD in Social Work from the University of Toronto, he holds a Masters of Social Work from the University of Toronto, and a Bachelor of Science degree in Political Economy from Trinity College, University of Toronto. His academic research focused mainly on dilemmas and challenges of diversity in human services and social welfare, with particular focus on needs of ethnic, racial, and religious minorities in Canada. Dr. Azmi has published articles on challenges of diversity for social work and social welfare, racism and human rights, immigration settlement, and on religious and welfare issues affecting Canada's Muslim population. He has a strong background in community activity and has been actively involved in issues facing immigrants and Muslim and other racialized and marginalized communities in Toronto.

Dr. Azmi provided the audience with an overview of the purpose of the Ontario Human Rights Commission and identified key principles and components of human rights legislation and action. He stated that obesity is not listed specifically as a condition for which a human rights violation can be directly attached. However, he stated that since preparing his talk for this summit he can see how obesity could be tied in some cases to sexual harassment complaints where the physicality of obesity is commented on in a discriminatory way that is harassment in the workplace, community or educational environment. Dr. Azmi also described disability and human rights and encouraged the audience to consider how obesity in some cases can be experienced as a disability as a result of the social attitudes and beliefs about obesity and resulting stereotypes that develop. Dr. Azmi explained that changes to how the human rights code is interpreted come about from advocacy and awareness for which this summit is a start.

Michael Vallis

Dr. Michael Vallis is a registered clinical psychologist employed at Capital Health, Halifax and cross appointed to Dalhousie University as Associate Professor in Psychiatry and Adjunct Professor in Psychology, where he practices health psychology. His main area of expertise is in adult health psychology, with an emphasis on diabetes, gastroenterology, cardiovascular risk and obesity. Clinical intervention focuses around behaviour change and adaptation to chronic disease with a specific focus on motivation, behaviour modification and emotion management. Dr Vallis recently launched the Behaviour Change Institute within Capital Health. The purpose of this institute is to provide competency based training in motivational enhancement, behaviour modification and emotion management interventions within primary care settings.

Dr. Vallis challenged participants to reflect on their own values and beliefs about obesity. He made a strong case to apply key psychological theories that help explain how bias develops and therefore a better understanding of ways in which to change the beliefs of health care providers. Dr. Vallis appealed to the group to consider ways in which to create environments of care that are accessible psychologically and emotionally for persons with obesity.

Diane Finegood

Dr. Finegood is the former Scientific Director of the Canadian Institutes of Health Research, Institute of Nutrition, Metabolism and Diabetes. During her appointment, she guided Canada's health research agenda on obesity and healthy body weight. As a Professor in the Department of Biomedical Physiology & Kinesiology, Dr. Finegood leads the Chronic Disease Systems Modeling Lab) which houses staff and students working to build maps, models, and solution-orientated frameworks to help address the problem of obesity. Dr. Finegood also serves as Executive Director of the CAPTURE Project (CANadian Platform To increase Usage of Real-world Evidence) (www.thecaptureproject.ca). This strategic initiative will build a system to support the collection and use of practice and policy-relevant, "real world" evidence. Dr. Finegood draws international recognition as a researcher, lecturer and contributor to the efforts of many organizations. She has written numerous book chapters and articles in peer-reviewed journals. She has contributed to public awareness by way of print, radio, and television media and serves the broader health community as a member of many committees, including the Advisory Board for Community Interventions for Health (<http://www.3four50.com/cih/>), the Expert Advisory Committee for the Canadian Health Measures Survey and the Board of Directors for the Canadian Obesity Network (<http://www.obesitynetwork.ca/>) and the Canadian Fitness and Lifestyle Research Institute (<http://www.cflri.ca/>). She has received a range of honours and awards for both her academic and leadership contributions, including the Inaugural Distinguished Lecturer of the Canadian Obesity Network (2009), the Frederick G. Banting Award of the Canadian Diabetes Association (2008), Canada's Top 100 Women Award (Trailblazers & Trendsetters Category) (2006) the Distinguished Nutrition Leadership Award from Danone Institute Canada (2006); and the George Bray Founder's Award from NAASO, the Obesity Society (2005).

Dr. Finegood clearly identified key take home messages for the audience looking at weight bias through the lens of complex systems theories/framework. To her knowledge, this has not been done yet it seems logical. Dr. Finegood built her comments and recommendations on the Foresight map of factors that contribute to obesity. Looking at specific areas of the map, Dr. Finegood suggested that weight bias could be explored within the complex systems framework. The five take home messages were: 1. complexity cannot be ignored (weight bias and obesity are not simple issues with straight forward solutions); 2. Addressing weight bias requires systems thinking; 3. there are no simple solutions; 4. Need to think about scale and interactions between levels of a system; 5. Individuals matter, interaction between individual and environment important, match capacity and complexity; 6. Competition interacts with cooperation and where they are on the scale matter. Dr. Finegood made the following recommendations for the council to consider: Think about scale for systems approach. Places to intervene. 1. Paradigm - deeply held beliefs about "fat" people. 2. Goals of system - what is trying to achieve, blame and shame. 3. Structure - as a whole, discrimination acceptable social norm. 4. Feedback and delays - vicious cycle between obesity, stigma and depression. 5. Structural elements -multiple levels and people (i.e doctors, teachers, etc)

Appendix B
Summit Agenda

7:30-8:00 am	Registration and continental breakfast, student videos
8:00-8:20 am	Opening remarks and orientation to day one of the meeting from Scientific Directors of CON and PREVNet
8:20-9:00	Key note address Weight Bias and Discrimination: A Social Injustice and Public Health Priority <i>Rebecca Puhl, PhD, Rudd Center for Food Policy & Obesity, Yale University</i>
9:00-9:20	Personal story of weight bias and discrimination <i>David Dolomont</i>
9:20-9:30 am	Introductions of expert panel and council members
9:30-9:50	Using Media Literacy to Fight Obesity and Weight Discrimination <i>Matthew Johnson, Director of Education, Media Awareness Network</i>
9:50-10:10	Integrating mental health promotion and weight bias awareness into the prevention of weight-related disorders: Findings from an Ontario-based interdisciplinary professional development project. <i>Dr. Gail McVey, Health Systems Scientist, Community Health Systems Resource Group, SickKids Hospital</i>
10:10-10:25 am	Break
10:25-10:45	Weight Discrimination and Vulnerability to Bullying <i>Wendy Craig, Scientific Co-Director, PREVNet: Promoting Relationships and Eliminating Violence. Professor, Queen's University.</i>
10:45-11:05	The Ontario Human Rights Code and protection from discrimination related to obesity <i>Shaheen Azmi, Acting Director of the Policy, Education, Monitoring and Outreach Branch, Ontario Human Rights Commission</i>
11:05-11:25	So I Am Biased, Now What Do I Do? <i>Michael Vallis, PhD R Psych</i> <i>Capital Health Behaviour Change Institute, Psychologist, CDHA</i> <i>Associate Professor, Dalhousie University</i>
11:25-11:45	Weight bias and discrimination in the context of the complexity of obesity <i>Diane Finegood, Professor, Simon Fraser University; Executive Director, the CAPTURE Project</i>
11:45-12:15	Questions to the Expert Panel
12:15-1:00pm	Lunch (Provided)
1:00-2:00 pm	Statements from the floor (pre-submitted)
2:00-3:00 pm	Floor open for further questions to expert panel
3:00-3:30 pm	Review of the day and Closing Remarks
4:00pm-9:00pm	Council meeting at One King West Hotel and Residences. Room TBA

Appendix C Council member biographies

Hon. A. Anne McLellan P.C., O.C.: The Honourable A. Anne McLellan, P.C., O.C. joined Bennett Jones LLP in its Edmonton office July 4, 2006. Ms. McLellan provides strategic advice to the firm and its clients. Ms. McLellan serves on the Board of Directors of Nexen, Agrium, Cameco and the Edmonton Regional Airport Authority. She also sits on the Boards of the Royal Alexandra Hospital Charitable Foundation and Habitat for Humanity Edmonton Society. Among her many community commitments she is also involved with the Canadian Blood Services Organ and Tissue Donation and Transplantation Steering Committee. She is also a member of the Premier's Council for Economic Strategy where she provides "guidance on actions the Alberta government can take to best position the province for the future." On May 12, 2006 she was appointed Distinguished Scholar in Residence at the University of Alberta in the Alberta Institute for American Studies. In 2007 the University of Alberta awarded Ms. McLellan an honorary doctorate of laws degree and in July 2009 Ms. McLellan was appointed an Officer of the Order of Canada. Ms. McLellan served four terms as the Liberal Member of Parliament for Edmonton Centre from October 25, 1993 – January 23, 2006. She served as Deputy Prime Minister of Canada and the first Minister of Public Safety and Emergency Preparedness (December 2003 – January 2006), Minister of Health (January 2002 – December 2003), Minister of Justice and Attorney General of Canada (June 1997 – January 2002) and Minister of Natural Resources and Federal Interlocutor for Métis and Non-Status Indians (November 1993 – June 1997). She holds a Bachelor of Arts and a Law degree from Dalhousie University and a Master of Laws degree from King's College, University of London. Ms McLellan was admitted to the Bar of Nova Scotia in 1976.

Bruce Ferguson: Dr. Bruce Ferguson is the Director of the Community Health Services Resource Group at The Hospital for Sick Children. He is also a Professor of Psychiatry, Psychology and the Dalla Lana School of Public Health at the University of Toronto. Dr. Ferguson taught psychology at Carleton University and then moved to leadership positions in the health care system at the Royal Ottawa Hospital and the Clarke Institute of Psychiatry. In 1997, Dr. Ferguson moved to The Hospital for Sick Children where he founded the Community Health Systems Resource Group (CHSRG). The purpose of the CHSRG is to create and implement systemic models for children's success by transferring knowledge to all who can influence healthy outcomes for children. Our goals are to: improve services for children and youth at the community level; build community commitment to children and youth; and advocate for strong policies at all levels of government that support children, youth and their families. Dr. Ferguson has a strong record as a program developer and leader. He has conducted several reviews of programs in healthcare settings and sits on a wide array of policy and program working groups. Dr. Ferguson has been involved with the children's mental health measurement project on the Ministry of Children and Youth Services since 1999. The CHSRG continues to lead the implementation and analysis of the outcome measure in that project. In 2004-2005, Dr. Ferguson led a team which carried out the early School Leavers study for the Ontario Ministry of Education. Since then he has worked with the Ministry on the

Learning to 18 and Student Success programs. Currently, his team has just completed a study on the transition from grade 8 through grades 9 and 10 and is studying the implementation of changes in classroom instruction to foster academic success in students.

Myles Ellis: Myles Ellis holds a Bachelor's Degree in Education and a Masters Degree in Education from Saint Mary's University in Nova Scotia, as well as a Certificate in Industrial Relations from Queen's University in Ontario. He is a director with the Canadian Association for the Practical Study of Law in Education (CAPSLE). His career in education started in Prince Edward Island as a teacher; then department head, vice-principal and principal; Director at the School Board level; and later, as a consultant with the provincial Department of Education. He was General Secretary of the Prince Edward Island Teachers' Federation (PEITF) for seven years before taking the position of Director of Economic and Member Services with the Canadian Teachers' Federation (CTF) in February 2007. At present, he is Co-Director of the Research and Information Division at CTF. His responsibilities include directing research initiatives in the areas of economic and member services, and professional issues.

Timothy Caulfield: Timothy Caulfield has been Research Director of the Health Law Institute at the University of Alberta, since 1993. In 2001 he received a Canada Research Chair in Health Law and Policy. He is also a Professor in the Faculty of Law and the School of Public Health. Over the past several years, he has been involved in a variety of interdisciplinary research endeavours that have allowed him to publish over 150 articles and book chapters. He is a Health Senior Scholar with the Alberta Heritage Foundation for Medical Research, the Principal Investigator for a Genome Canada project on the regulation of genomic technologies, and an AllerGen Network project on ethics, evidence and health policy research, the theme leader for the Stem Cell Network and has several other projects funded by the Canadian Institutes of Health Research. Professor Caulfield is and has been involved with a number of national and international policy and research ethics committees, including Canadian Biotechnology Advisory Committee, Genome Canada's Science Advisory Committee, and the Federal Panel on Research Ethics. He is a Fellow of the Royal Society of Canada and the Canadian Academy of Health Sciences Expert Panel on Pesticides. He teaches biotechnology in the Faculty of Law and is the editor for the *Health Law Journal* and *Health Law Review*.

David Sculthorpe: David is the CEO of the Heart & Stroke Foundation of Ontario. A seasoned business leader, David's career has spanned both the entrepreneurial and corporate worlds. He has held a variety of executive positions including President at consumer products and pharmaceutical corporations such as Warner Lambert, Cadbury Schweppes PLC, and Pfizer, he has run his own company, and has lived and worked in France, Brazil, the United States, and Canada. While leading divisions of these multi-nationals, David created transformational change through innovation, customer service and talent development, ultimately leading to a higher performance in the workforce and a "playing to win" culture. David holds a Bachelor of Commerce (B.Comm) from Queen's University, as well as a Master of Science in Organizational Development (MSOD) from Pepperdine University, California. David is a member of Young

Presidents Organization (YPO), a member and past Chairman of the Advisory Board with the School of Business at Queen's University, Chair of PREVNet, a national research network committed to stopping bullying in Canada, a board member of Crescent School, as well as Vice Chair of the Soulpepper Theatre Company Board of Directors in Toronto. He has also held board positions with Food and Consumer Products of Canada, Confectionery Manufacturers Association of Canada and Canadian Parks & Wilderness Society.

Hugh O'Reilly: Hugh O'Reilly is the head of the Pension Benefits and Insolvency Practice at Cavalluzzo Hayes Shilton McIntyre and Cornish. Hugh's practice involves giving advice to Trustees of major multi-employer and public sector plans both in Ontario and across Canada. Hugh also acts for trade unions in representing their interests on pension and benefit issues. Hugh has also acted on a number of major insolvencies and restructurings both for unions and for retirees. Hugh has strong relationships with pension regulators at both the provincial and federal levels. Hugh has also worked on restructurings that led to the development of special funding relief regulations at the federal level. Hugh is an experienced employment lawyer. Hugh regularly represents terminated employees at senior management and executive levels. Hugh routinely advises on issues relating to pension, bonus, stock option and other incentive plans in a wrongful dismissal context. Hugh has also successfully represented patient advocacy groups on human rights issues that relate to restricted drug formularies in both the private and public sector. Hugh is a frequent speaker at conferences and publishes regularly on pension and benefits topics, including a column in Benefits Canada.

Louise Forand-Samson: For over 40 years, Louise has done remarkable work as artistic director of the Club musical de Québec. She was the director of international development for Quebec's renowned chamber orchestra Les Violons du Roy. Louise also served as artistic co-director of the Lanaudière International Music Festival from 1990 to 2000. A pianist by education, she taught at the Conservatoire de musique de Québec for nearly 25 years. She has received numerous awards and prizes and has toured extensively throughout Quebec, the rest of Canada, and several countries in Europe. She has also presented master classes in co-operation with the Conservatoire de musique de Québec and the Faculty of Music at Laval University. The Orchestre symphonique de Québec Foundation's Award of Excellence has been awarded to Ms. Forand-Samson for her contribution to the development of classical music in the greater Quebec City area. The Foundation also presented her with the 20th anniversary edition of its Award for Excellence in Arts and Culture, to honour this multifaceted personality who has made her mark in the worlds of musical performance, music education, and academic research. Through her exceptional commitment to the arts and culture and her professional achievements in the arts, she has had a decisive impact on the world of music in the greater Quebec City area. Louise sits on several juries for the Canada Council for the Arts, the Conseil des arts et des lettres du Québec, and the Conseil québécois de la musique. She also participates regularly in conferences in both Europe and the United States. She has served on the Board of Directors of the Domaine Forget Academy of Music and Dance. She is also Chair of the Board of the Laval University Research Chair on Obesity,

a cause especially close to her heart.

Merryl Bear, M.Ed.(Psych): Is the Executive Director of the National Eating Disorder Information Centre (www.nedic.ca), Canada's preeminent organization of its kind. sits on the board of directors and expert advisory committee of the Canadian Women's Health Network (CWHN) and was on the expert advisory committee for the Elementary Teachers Federation of Ontario's Body Image Project. Merryl is trained as an educational psychologist and has taught at high schools, universities and colleges in South Africa and Canada. She was a faculty member of the Department of Educational Psychology at the University of Natal, Pietermaritzburg (South Africa). She has taught at George Brown College in Toronto was in the Assaulted Women, Children Counsellor/Advocate, and Human Services Counselling programs. Much of her teaching focused on Gender Identity Development and Women's Issues in Psychology. Merryl is an experienced public speaker and a sought-after resource for the media on the topics of food and weight preoccupation, self-esteem and body-image and related issues. She has contributed articles and book chapters to a number of publications. In recognition of her work at NEDIC, Merryl was awarded the Toronto Sun's Women on the Move Award in 1995 and included in the Who's Who of Canadian Women since 1996

Chris Burton: Is the Chief Commissioner, Girl Guides of Canada-Guides du Canada. Chris Burton is Chief Commissioner of Girl Guides of Canada-Guides du Canada, an organization that has been empowering girls to achieve greatness, since 1910. She has been involved with youth as an adult volunteer with Girl Guides for over 40 years and as an educator for 30 years. As a high school teacher and curriculum leader, Chris has been involved in curriculum development, item writing and piloting of new initiatives with Alberta Education. She was awarded Teacher of the Year and Coach of the Year locally, and was a finalist for the Alberta Teachers Association Excellence of Teaching award. She was presented with an ATA Life Membership in 2009. Within Girl Guides, Chris has worked as a unit Guider with Guides, Pathfinders and Rangers (girls ages 9 – 18), as well as being a Commissioner at all levels of the organization and a Trainer for adult Members. She is an Honorary Life Member of Girl Guides and was awarded the Gold Maple Leaf Award in 2006, the highest award in Guiding. Chris was involved with the Duke of Edinburgh's Award program for 25 years and was presented with a Duke of Edinburgh's achievement award by Prince Philip in 2006. For her volunteer activities and achievements, Chris has been presented with the Queen Elizabeth Golden Jubilee Medal (2002), Alberta Government Centennial Medal (2005) and Alberta Sport and Recreation Medal (2006), as well as being inducted into the Alberta Sports Hall of Fame. Just recently, Chris became one of 6, 2010 Stars of Alberta award recipients for community spirit, volunteerism and action. Chris received a B.Ed from the University of Lethbridge (1974), Diploma in Education (1978) and BA (1986) and was presented with the University of Lethbridge Alumni Honour Society Award in 2009. Chris was on the Helen Schuler Nature Center Board and during that time developed nature and cultural programs for elementary school children. Chris is currently on the Volunteer Lethbridge Board, chairing the Board Development Committee and the Leaders of Tomorrow Committee.

Appendix D
Summary of Media Responses and Outcomes

As of January 28, 2011 over 39 million media impressions and over 60 unique media hits were generated.

Media coverage chart outlining total confirmed and expected media coverage to-date for the *Canadian Summit on Weight Bias and Discrimination*.

CONFIRMED CANADIAN COVERAGE

PRINT			
Outlet	Date	Headline	Impressions
Toronto Star (Toronto, ON)	January 17, 2011	No more fat jokes	1,134,400
Trail Daily Times (Trail, BC)	January 20, 2011	Summit addresses widespread social weight bias; Obese people encounter thoughtless comments daily	9,989
Prince George Citizen (Prince George, BC)	January 21, 2011	The overweight share stories of widespread bias	32,900
Globe and Mail	January 27, 2011	Publishing ‘headless stomach’ images and making snide comments about ‘big butts’ are two techniques that worsen our weight problem	906,600
TOTAL PRINT COVERAGE (4 HITS): 2,083,889			
NEWSWIRES			
CanWest	January 12, 2011	Toronto summit to weigh the social strains of obesity discrimination	N/A
Canadian Press	January 17, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	N/A
TOTAL NEWSWIRE COVERAGE (2 HITS): N/A			
RADIO			
CBC Victoria (Victoria, BC)	January 17, 2011 7:50 a.m.	Interview with patient David Dolomont	15,900
CBC Kelowna (Kelowna, BC)	January 17, 2011 8:30 a.m.	Interview with Hugh O’Reilly	7,200
CBC Vancouver (Vancouver, BC)	January 17, 2011 8:40 a.m.	Interview with patient David Dolomont	103,000

CANADIAN OBESITY NETWORK SUMMIT MEDIA COVERAGE CHART/2

CONFIRMED CANADIAN COVERAGE (CONT'D)

RADIO			
Outlet	Date	Headline	Impressions
CBC Calgary (Calgary, AB)	January 17, 2011 8:10 a.m.	Interview with patient David Dolomont	27,900
CBC Edmonton (Edmonton, AB)	January 17, 2011 8:20 a.m.	Interview with patient David Dolomont	3,600
CBC Regina (Regina, SK)	January 17, 2011 6:50 a.m.	Interview with Hugh O'Reilly	1,800
CBC Winnipeg (Winnipeg, MB)	January 17, 2011 7:50 a.m.	Interview with patient David Dolomont	25,000
CBC Ottawa (Ottawa, ON)	January 17, 2011 6:00 a.m.	Interview with Dr. Arya Sharma	50,700
CBC National (Ontario)	January 17, 2011 6:10 a.m.	Interview with Dr. Arya Sharma	501,100
CBC Thunder Bay (Thunder Bay, ON)	January 17, 2011 6:50 a.m.	Interview with Dr. Arya Sharma	8,800
CBC Sudbury (Sudbury, ON)	January 17, 2011 7:20 a.m.	Interview with Hugh O'Reilly	15,500
CBC Windsor (Windsor, ON)	January 17, 2011 7:40 a.m.	Interview with patient David Dolomont	6,400
CBC Toronto (Toronto, ON)	January 17, 2011 3:40 p.m.	Interview with Dr. Arya Sharma	105,400
CBC Quebec City (Quebec City, QC)	January 17, 2011 6:15 a.m.	Interview with Hugh O'Reilly	4,700
CBC: Radio Canada (National)	January 18, 2011 6:15 a.m.	Interview with Louise Samson	272,000
CBC: Radio Canada (National)	January 18, 2011 1:55 p.m.	Interview with Natalie Dumas	272,000
CJAD-AM (Montreal, QC)	January 18, 2011 3:05 p.m.	Interview with Dr. Rebecca Puhl	21,400
CBC Cape Breton (Cape Breton, NS)	January 17, 2011 6:20 a.m.	Interview with Dr. Arya Sharma	7,200

CANADIAN OBESITY NETWORK SUMMIT MEDIA COVERAGE CHART/3

CONFIRMED CANADIAN COVERAGE (CONT'D)

RADIO			
Outlet	Date	Headline	Impressions
CBC Corner Brook (Corner Brook, NL)	January 17, 2011 7:10 a.m.	Interview with Dr. Arya Sharma	2,000
CBC Corner Brook (St. John, NL)	January 17, 2011 7:10 a.m.	Interview with Hugh O'Reilly	9,100
CBC Gander (Gander, NL)	January 17, 2011 7:20 a.m.	Interview with Dr. Arya Sharma	9,100
CBC Yellowknife (Yellowknife, NWT)	January 17, 2011 7:35 a.m.	Interview with Hugh O'Reilly	41,000
CBC Yellowknife (Whitehorse, NWT)	January 17, 2011 8:05 a.m.	Interview with Hugh O'Reilly	4,200
CBC The World this hour (National)	January 17, 2011	Interview with David Dolomont, Dr. Arya Sharma and Rebecca Puhl	350,000
CBC The World at 6 (National)	January 17, 2011 6:00 p.m.	Interview with David Dolomont, Dr. Arya Sharma and Rebecca Puhl	350,000
TOTAL RADIO COVERAGE (25 HITS): 2,215,000			
TELEVISION			
Global News (Toronto, ON)	January 18, 2011 6:00 p.m.	Featured interviews with Rebecca Puhl, David Dolomont, Dr. Sharma and Dr. Vallis	841,000
Global News (Toronto, ON)	January 18, 2011 11:00 p.m.	Featured interviews with Rebecca Puhl, David Dolomont, Dr. Sharma and Dr. Vallis	295,000
TOTAL TELEVISION COVERAGE (2 HITS):1,136,000			
ONLINE			
Vancouver Sun	January 12, 2011	Toronto summit to weigh the social strains of obesity discrimination	461,900
Canada.com	January 13, 2011	Toronto summit to weigh the social strains of obesity discrimination	4,885,322

CANADIAN OBESITY NETWORK SUMMIT MEDIA COVERAGE CHART/4

CONFIRMED CANADIAN COVERAGE (CONT'D)

ONLINE			
Outlet	Date	Headline	Impressions
Ottawa Citizen	January 13, 2011	Toronto summit to weigh the social strains of obesity discrimination	443,000
Global News	January 13, 2011	Toronto summit to weigh the social strains of obesity discrimination	50,000
Global News Edmonton	January 13, 2011	Toronto summit to weigh the social strains of obesity discrimination	50,000
Thestar.com	January 17, 2011	No more fat jokes	2,377,179
Metro News	January 17, 2011	Summit seeks end to overweight, obese bias	35,000
Metro News	January 17, 2011	Summit seeks end to overweight, obese bias	169,000
Metro News	January 17, 2011	Summit seeks end to overweight, obese bias	22,700
Bioportfolio.com	January 17, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	7,500
Brandon Sun	January 17, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	1,000
Ctv.ca	January 17, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	2,751,947
Healthandfitness.com	January 17, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	551,298
Guelph Mercury	January 17, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	29,000
Lethbridge Herald	January 17, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	900
Medicinehatnews.com	January 17, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	14,500

CANADIAN OBESITY NETWORK SUMMIT MEDIA COVERAGE CHART/5

CONFIRMED CANADIAN COVERAGE (CONT'D)

ONLINE			
Outlet	Date	Headline	Impressions
Rdmag.com	January 17, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	3,500
Winnipegfreepress.com	January 17, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	350,748
Estavenmercury.com	January 17, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	5,000
Yorktonnewsthisweek.com	January 17, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	4,000
Healthzone.ca	January 17, 2011	No more fat jokes	222,393
Cbc.ca	January 17, 2011	Discrimination no joke; obesity forum	5,264,687
MSN.ca	January 17, 2011	Discrimination no joke; obesity forum	13,651,009
Fortfrancetimes.com	January 18, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	61,294
Fashionism.ca	January 18, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	299,187
Fftimes.com	January 18, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	61,294
Red Deer Advocate	January 20, 2011	Social weigh bias wide-spread: summit	65,924
Times Colonist	January 24, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	50,000
Prince George Citizen	January 24, 2011	The overweight share stories of widespread bias	72,611

CANADIAN OBESITY NETWORK SUMMIT MEDIA COVERAGE CHART/6

CONFIRMED CANADIAN COVERAGE (CONT'D)

ONLINE			
Outlet	Date	Headline	Impressions
Health.mytelus.com	January 24, 2011	Inaugural summit addresses widespread social weight bias, says it needs to end	750
Globe and Mail	January 27, 2011	Shaming the obese - with photos like these - isn't working	2,229,649
TOTAL ONLINE COVERAGE (31 HITS):			34,192,292
TOTAL MEDIA COVERAGE (64 HITS):			39,627,181