

12-month virtual group program to reduce weight stigma and increase behaviour-related self-confidence

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Aim: Weight stigma, internalized bias, and lack of confidence interfere with obesity care. We hypothesized a 12-month virtual program would reduce stigma and improve self-confidence for adults living with obesity.

Methods: Program began October 2024 with participants attending two monthly 60-minute sessions: Group Education (GES) and Group Support (GSS). GES covered medical, nutrition, exercise, and behavioural topics. Pre- and post-GES polling assessed stigma, bias, knowledge, and confidence. Analysis included 100 adults (BMI >25 kg/m², 97% female, 86% with previous weight management attempts). McNemar test compared pre-post responses; Chi-Square examined confidence trends.

Results: Across sessions, significant shifts emerged. "My weight is my fault" (disagree) increased 51% to 87% (p=0.0014). "I judge myself when unable to reach goals" (agree) decreased 75% to 43% (p=0.038); (disagree) increased 19% to 49% (p=0.006). "I judge myself about foods" (agree) decreased 67% to 38% (p=0.006); (disagree) increased 23% to 49% (p=0.003). Guilt after eating decreased (p<0.05). Confidence in sustaining health behaviours improved across 12 sessions ($\chi^2=18.42$, p=0.012).

Conclusion: This program demonstrated significant session-by-session outcomes reducing bias and stigma while increasing confidence. Participants shifted from viewing weight as personal failure to recognizing complex physiological factors. The virtual format overcame barriers including geographic limitations and provider scarcity, providing a scalable model for obesity care.

(The development and dissemination of the OM Wellness Workshop received funding from A&A Clinical Research, Bausch Health Canada and Currax Pharmaceuticals. No funding was received for this research.)