

EXPLORING THE INTERSECTION OF RACE AND WEIGHT IN THE EVERYDAY
LIVES OF BLACK CANADIANS

by

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This research study was conducted in Mi'kma'ki, the ancestral and unceded territory of the Mi'kmaq People, and this is also land where African Nova Scotian people have lived for over 400 years. We are all treaty people; therefore, we all have a responsibility to understand the history of this land, and its first peoples, and be committed to fair and just relations.

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Dedication

This project is dedicated to those who volunteered their time to share their lived experiences with me. They have endured and continue to endure and through sharing their stories, they have provided invaluable knowledge to hopefully reduce the burden of the journey on those yet to travel it.

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Abstract

Despite perceptions of Canada as an inclusive nation, hegemony is enacted through institutions of the nation state and serves to oppress specific populations. For Black populations in Canada, oppression is often operationalized as anti-Black racism. Despite growing recognition of systemic racism and identity-based discrimination endured by Black populations, there is a dearth of literature that explores weight oppression among Black Canadians. The purpose of this study was to explore how weight and race, as identities, intersect to impact the everyday lives of Black Canadians living in Nova Scotia. A hybrid socioecological and intersectional framework was employed, allowing in-depth exploration the intersecting impacts of identity in the everyday lives of Black Canadians. Three themes were developed from the data: multifaceted and complex identities, the two things that people remind you of, and social support and its impacts on sense of self. Findings from this study identify avenues for change through social support to better provide for Black Canadians living with overweight or obesity.

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Chapter One: Introduction

Canada is often idealized as a country of multiculturalism, inclusion, and social welfare. Despite perceptions of Canada as an inclusive nation, dominant values, beliefs, and traditions, enacted through institutions of the nation state, serve to oppress specific populations. For example, settler colonialism, performed through colonial violence and policies, has caused intergenerational trauma and significant health impacts on Indigenous populations in Canada (King et al., 2009; Walls & Whitbeck, 2012). Further, franchise colonialism (i.e., colonialism based on the exploitation of the native population) (Englert, 2020), notably through the Atlantic slave trade, has resulted in large populations of African-descent in North America having to resist land insecurity, assimilation, and cultural suppression (Paradies, 2016).

The Canadian multicultural mosaic has only come under scrutiny in recent decades and systems persist to render oppression invisible. Data collection is a one example of the masking of oppression in Canadian society. Race and ethnicity data are not routinely collected and reported in the Canadian criminal justice system, nor was race considered in the field of criminology until recently (Moscher & Mahon-Haft, 2010; Reasons et al., 2016). The categorization of “visible minority” acts to diminish the experiences of discrimination faced by Black Canadians (Siddiqi et al., 2017). Additionally, the mass media plays a role in constructing hegemonic, or ideologically dominant, discourse that normalizes certain traits and groups and diminishes the experiences of others (Alberga et al., 2016). Through systems of oppression individuals’ access to resources and opportunities is restricted and their health impaired (Garcia et al., 2022).

As oppression manifests as interpersonal interactions in everyday life, discrimination is an important consideration in examining the lived experiences of the oppressed. Consistent academic data on the prevalence of discrimination in the Canadian context is scant; however, a recent analysis indicates that nearly a quarter of Canadians have experienced a form of everyday discrimination (Godley, 2018). Experiences of discrimination are associated with adverse health outcomes for those who are targeted (Godley, 2018; Veenstra & Patterson, 2016). Specifically, perceived discrimination is linked to higher rates of diabetes, hypertension, HIV, stress, and depressive symptoms (Browne, 2017; Pearl & Puhl, 2018; Shah, 2013; Spence et al., 2016; Sutin & Terracciano, 2017; Veenstra & Patterson, 2016). Discrimination may impact health through varying mechanisms including but not limited to delayed healthcare seeking, distrust in the healthcare system, and lower perceived quality of care (Ben et al., 2017; Godley, 2018; Pascoe & Smart Richman, 2009). Further, experiences of discrimination have been documented in a variety of settings including in the workplace, in healthcare, within the family, and in education (Godley, 2018).

For Black populations in Canada, oppression is often operationalized as anti-Black racism. Anti-Black racism is defined as “policies and practices rooted in Canadian institutions such as, education, health care, and justice that mirror and reinforce beliefs, attitudes, prejudice, stereotyping and/or discrimination towards people of Black-African descent (Black Health Alliance, 2023).” In 2017, as part of the United Nations International Decade for People of African Descent, it was reported that anti-Black racism was pervasive in most Canadian institutions (UN Human Rights Council, 2017). Anti-Black racism may manifest as disproportionate disadvantages faced by Black

populations. For example, systemic racism drives lower educational outcomes for Black students, in part, due to lack of Black teachers, and teacher assessments of student capabilities (DasGupta et al., 2020). Specifically, Black students being taught by Black teachers can result in higher enrollment in post-secondary, and only 3% of Black students being perceived as *gifted* despite Black students making up 12% of the population in Toronto schools (DasGupta et al., 2020). Further, between 1986 and 2006, income disparities between Black families with young children and the general population widened (Livingstone & Weinfield, 2015).

Anti-Black racism is a significant public health crisis (Dryden & Nnorom, 2021); however, it is not the only form of oppression endured by Black populations. In fact, intersectionality (in an academic context) was coined on the recognition of overlapping oppressions (gender and race discrimination) that Black women experienced in legal matters (Crenshaw, 1989). Black LGBTQ+ community members have reported facing a double jeopardy, through homophobia in the Black community and racism in the LGBTQ+ community (Bajko, 2014). Further, African-American LGBT older adults report significantly higher lifetime LGBT-related discrimination when compared to Non-Hispanic White¹ and Hispanic LGBT older adults (Kim, Jen & Fredricksen-Goldsen, 2017). With respect to (dis)ability Black worker's experiences have been largely absent from debates, often situating their employment experiences within a framing of race discrimination (Berghs & Dyson, 2020). Further Black people with disabilities face

¹ There is debate about whether to capitalize "White" in academic contexts. Here, and throughout, it is capitalized. My thought is that a proper noun is a) more visible and b) recognizes that Whiteness serves as the name for the dominant system of Oppression in Canada.

negative stereotypes, cultural assumptions and exclusion from the disability movement and the Black community (Vernon & Swain, 2002).

The Black population in Canada is diverse and growing. The Black population represents diverse languages, cultures, ethnicities, and traditions (Mensah, 2005, 2014). As of 2021, approximately 1.5 million people in Canada identified as Black, representing 4.3% of the total population (Statistics Canada, 2022). This means the Black population represent the third largest *visible minority* group in Canada. Further, the Black population in Canada is expected to double by the year 2040 (Statistics Canada, 2023). While immigration is a driving factor behind the growth of the Black population, many Black communities have long-standing roots in the country (Beals & Wilson, 2020).

Nova Scotia is a particularly unique context given the historical roots of Black populations in the Atlantic province. Nova Scotia is home to a historic population of people of African descent collectively recognized as African Nova Scotians (ANS), or indigenous African Nova Scotians (Mensah, 2005; Sehatzadeh, 2008). Fifty-two historic African Nova Scotian communities are recognized in the province (Black Cultural Centre, 2021). The roots of these communities extend back over 400 years (Government of Nova Scotia, 2023). Formerly enslaved Black Loyalists that arrived between 1782- and 1785 marked the beginning of centuries long migration of Black populations to Nova Scotia. Jamaican Maroons (1796), refugees of the war of 1812, and Caribbean immigrants known as the “late arrivals” (1920s) represent the arrival of what are now generations of Black people residing in Nova Scotia (Black Cultural Centre, 2021). In fact, most of the Black population in Nova Scotia trace their roots back three or more generations in the province.

The long-standing histories of Black populations in Nova Scotia have not been engrained into Canadian mainstream values, beliefs, or traditions, resulting in similar experiences of anti-Black racism to other Black populations. ANS have been cheated out of land and denied equal status since their arrival (Black Cultural Centre, 2021). The ENRICH project demonstrated the impact of environmental racism in the province through the disproportionate allocation of toxic waste and landfills in and around Black and Indigenous communities (Waldron, 2018). Nova Scotia's public education system has also pushed Black students to the margins. Black students have reported feeling disconnected and that they did not belong in school (Hamilton-Hinch et al., 2021). Further, the justice system actively plays a role with Black populations in Nova Scotia facing disproportionate police stops and racial profiling in the form of street checks (Bundy, 2019).

Despite growing recognition of the systemic racism and identity-based discrimination endured by Black populations, there is a dearth of literature that explores weight oppression as an intersecting form of oppression experienced by Black Canadians. Weight oppression is used here as an overarching term, encapsulating weight bias, weight stigma, and weight discrimination. The literature that does exist exploring the intersections of weight discrimination and race is predominately from the United States (US) (Himmelstein et al., 2017; Smith, 2019). Although Black women from the US have the highest rates of obesity compared to other populations, complex interplays exist between weight discrimination (sizeism) and racial identity. For example, Black women are more likely to endorse a variety of sizes as attractive, emphasize style and presentation over size in attractiveness ratings, and use their bodies as resistance to

hegemonic body image discourse compared to White women (Capodilupo & Kim, 2014). Despite this, Black women, not dissimilar from women of other ethnic groups, feel incessant pressure from a variety of sources to conform to standards of thinness (low body weight) groups (Grabe & Hyde, 2006; Poran, 2006; Shaw et al., 2004).

The absence of literature exploring weight discrimination in Canada is surprising given its prevalence of 3% (Godley, 2018) and its documented growth in the neighboring United States (Andreyeva et al., 2008). Being “fat” has been reported as the most common reason for school-based bullying, with approximately 85% of respondents viewing it as a very common problem in Canada (Puhl et al., 2016). Weight discrimination is the manifestations of weight bias and stigma, experienced by those living in larger bodies (Kirk et al., 2020). Weight bias and stigma are examples of macrosystem ideologies. Bronfenbrenner (1977) describes macrosystems as the overarching prototypes (i.e., values, traditions, sociocultural norms) that govern an individual’s development by shaping the meso- (interconnection of microsystems, e.g., parent’s relationship with their child’s teacher), exo- (extension of the mesosystem that indirectly influences the microsystems, e.g., mass media), and microsystems (the everyday settings an individual operates in, e.g., the home or school). In the case of weight bias and stigma the macrosystem is reflected in individual attitudes and beliefs, that perpetuate a homogeneity of people living with obesity with labels such as being lazy, lacking in self-control or willpower, being non-compliant with treatment, among other perceptions (Kirk et al., 2020; Puhl & Heuer, 2009). Experiencing or perceiving weight discrimination negatively impacts the health of those living with overweight or

obesity (Puhl et al., 2017; Udo & Grilo, 2017). Further it has been associated with increased risky health behaviour (Sutin & Terracciano, 2017).

Purpose and Rationale

Experiencing oppression often occurs at the individual level for Black Canadians; however, hegemonic beliefs, histories of oppression, and policies enacted through institutions shape how and why weight discrimination and anti-Black racism manifest for this population. For example, an individual may experience an instance of discrimination but the projection of that discrimination by the perpetrator may stem from a belief in White supremacy. Further, through a shared identity, Black Canadians experience collective trauma such as in the aftermath of the murder of George Floyd (Bernard, 2020). Black Canadians living with overweight or obesity experience discrimination because of how systems have shaped hegemony and enacted oppression based on both their race and weight identities. Given the links between systems of oppression and individual's identities, both ecological and intersectional frameworks are well situated to explore everyday experiences of discrimination. For this study, Bronfenbrenner's socioecological model (SEM) (Bronfenbrenner, 1977) and intersectionality (Hill Collins & Bilge, 2020) guide the exploration of race and weight at their intersections. Thus, the purpose of this study was to explore how weight and race, as identities, intersect to impact the everyday lives of Black Canadians living in Nova Scotia. This study sought to achieve this through three research questions:

1. How does weight impact the everyday lives of adult Black Canadians?
2. How does race impact the everyday lives of adult Black Canadians?

3. How do weight and race intersect to impact the everyday lives of Black Canadians?

Given recent calls to declare systemic anti-Black racism as a public health crisis (Dryden & Nnorom, 2021), understanding how anti-Black racism and other forms of discrimination (e.g., weight discrimination/sizeism) manifest and intersect in the lives of Black Canadians is more pertinent than ever. Further, preliminary literature searches returned zero studies that explicitly seek to explore or address the intersections of weight discrimination and racism in the Black Canadian population. However, as Hill Collins & Bilge (2020, p. 4) indicate, intersectional analysis does not solely arise from the use of ‘intersectionality’ terminology and intersectional inquiry and praxis may arise in work not labelled ‘intersectional’; therefore, traditional database searches may not be able to fully identify literature that has explored the intersection of weight discrimination and racism in Black Canadians.

Key Concepts and Terminology

Oppression

Oppression as a social phenomenon is premised on dualized hegemony. That is, normalized and embedded social power provides the foundation for interpersonal interactions (Dominelli, 2002). The Canadian nation state houses both dualized weight and race ideologies that operate to oppress specific groups. Race hegemony is premised on Whiteness (Berg et al., 2007); whereas, weight hegemony is premised on ideologies of ‘normal’ weight and an obesity ‘epidemic’ (Cameron, 2014; McDermott, 2008). Oppressive interpersonal interactions occur between a dominant group (the oppressors) and a group that has been marginalized (the oppressed) (Gil, 2013; Mullaly, 2002).

Interpersonal interactions between dominant and subordinate groups are often premised on individuals' identities (e.g., White settler oppression of Indigenous populations).

Understanding individual's identities, how they are situated in social contexts, and how they interact in those contexts is pertinent to understanding influences on health and access to resources.

Othering. Othering is a process-based concept that represents one mechanism through which oppression operates. It is the process of constructing an Other that represents opposition to and difference from the norm (Evertsen, 2021). Evertsen (2012) writes that through examining what we are not by looking at others, we thus devalue the Other. Said's (2003) writings in *Orientalism: Western Conceptions of the Orient* are often recognized as foundational to understandings of the Other. Said notes essentializing, a process of homogenizing the Other, is critical to the construction of certain groups as the Other and thus dominant constructions of a collective self-image. Othering, and specifically essentializing, is pivotal in creating an "us-them" separation that bounds individual and group identities (Grove & Zwi, 2006). Othering has been posited as an "essential contribution" to understanding health inequalities for *minority populations* (Akbulut et al., 2020). Particularly important to this study is how the process of othering may create or diminish one's sense of belonging as it creates an *us-versus-them* ideology.

Weight Oppression, Weight Bias, Weight Stigma, and Weight Discrimination

Oppression based on weight status (particularly high weight status) is prevalent and detrimental to the health of individuals who experience it (Andreyeva et al., 2008; Godley, 2018; Gupta et al., 2020; Kirk et al., 2020). It is important to note conceptual

overlap exists in the literature (Gupta, 2020). Weight oppression is not typically used in weight-focused literature. Stigmatization is used as an umbrella term for weight/obesity bias, prejudice, stigma, and discrimination (Spahlholz et al., 2016). For example, Gupta and colleagues (2020) suggest stigma “includes stereotyping, prejudice, and discrimination”; however, the weight bias chapter of the Obesity Canada Clinical Practice Guidelines discusses prejudice, discrimination, and bias (implicit and explicit) as terms along a “continuum” (Kirk et al., 2020). This continuum is not well defined, so here I use weight oppression as the umbrella term for each concept along the continuum.

Weight bias is a concept that has 3 components, explicit, implicit, and internalized weight bias (Kirk et al., 2020). Explicit weight bias constitutes the overtly negative attitudes people hold toward those living with overweight or obesity (e.g., a belief that they lack willpower and self-control). Implicit weight bias is the unconscious component of these negative attitudes. That is, the holder of the bias does not recognize their bias, but it may still shape how they interact with people living with overweight or obesity. Finally, internalized weight bias is the adoption of implicit or explicit weight bias by an individual who may identify as living with overweight or obesity about themselves and their weight status (Kirk et al., 2020).

Definitions of weight stigma vary. For example, Obesity Canada’s guidelines define it as “the manifestation of weight bias through harmful social stereotypes associated with people living with obesity (p.3).” Whereas, Tomiyama et al., (2018) define it as “the social rejection and devaluation that accrues to those who do not comply with prevailing social norms of adequate body weight and shape (p.1).” Further, Hart et al., (2021) define it as “the disparaging association of larger bodies with negative person

characteristics (p.80).” It may be inferred that weight stigma represents an association of the body with negative characteristics, stereotypes; it is the marking of one’s body based on broader social beliefs, traditions, and perceptions.

Finally, weight discrimination is the actionable, experience-piece on the weight oppression continuum. Weight discrimination represents the unjust treatment of people living with obesity, or overweight (Kirk et al., 2020). In this sense, weight discrimination must be manifested outside of the mind. That is, weight discrimination is tangible. For example, a person may hold thoughts or attitudes about those living in larger bodies but without expressing them (i.e., by speaking, writing, or acting on them) this is simply weight bias. If this person were to call someone “fat and lazy” those thoughts become tangible in two ways, a) they are now audible, and b) they elicit a tangible reaction (either verbal, physical, emotional, or a combination) from the person who experiences the discrimination. Weight discrimination may also be enacted through policies that inhibit access to certain healthcare services, modes of transport, or leisure activities.

Chapter Summary

Canadian institutions uphold and perpetuate hegemony that oppresses certain groups and privileges others. There is a growing recognition that anti-Black racism has significantly shaped the lives of Black Canadians. Nova Scotia is a particularly unique context for the exploration of anti-Black racism due to the long-standing histories and traditions of ANS. Despite being part of the nation state for generations, ANS have had to endure anti-Black racism that has resulted in varying health inequities. While anti-Black racism is pervasive, it is not the only form of oppression Black Canadians have had to endure. For example, Black people living with overweight or obesity have endured

weight discrimination. However, there is a dearth of literature exploring weight discrimination in Black Canadians in Nova Scotia. Through hybridizing the SEM and intersectionality, this study seeks to explore how the weight and race identities overlap in Black Canadians living with overweight or obesity in Nova Scotia.

Chapter Two: Literature Review

Given the nature of oppression it is important to understand the levels of society it operates within and the mechanisms through which it operates. It is equally important to consider - particularly at the individual level – how identities intersect through systems of oppression and at what levels. Pertinent to this study is the exploration of weight and race identities and the respective systems of oppression. Given this, chapter two is structured using the systems of Bronfenbrenner’s SEM (1977): macrosystems, meso- and exosystems, and microsystems. The model is often explained as moving out or away from the individual; however, when exploring oppression, it is logical to explore the broadest of systems and how they trickle down toward the individual (i.e., macrosystems to microsystems). Macrosystems are the prototypes that set the patterns for structures and activities at the concrete level. Exosystems impinge upon an individual’s immediate settings but do not directly contain the individual. Mesosystems are the relations between major settings that contain the individual at a specific moment in development. Finally, microsystems are the immediate settings in which an individual resides.

Using the socioecological model, the insidious nature of oppression within the Canadian context can be explored at multiple levels of society. This literature review explores anti-Black racism and weight-bias, discrimination, and prejudice as the systems of oppression for racial and weight identities. Understanding oppressive systems and how they are operationalized enables the exploration of how oppression impacts the systems of individuals whose lived experience develops within such systems (Owusu-Bempah, 2020). Particularly important here is how the oppressive systems impact the health of

Black Canadians, those living with overweight or obesity, and those whose identities intersect both social categories.

Macrosystem and prevailing prototypes

Canada's prototypes are rooted in the founding of the nation. That is, the overarching values, beliefs, and attitudes that drive institutions, systems, and hegemony arise from a foundation of imperialism, colonialism, and exploitation (Byrne, 2017). These dominant prototypes may be reflected through the policy agenda. For example, Residential Schools were a product of policy, driven by the ethnocentric belief in the superiority of "Whiteness" (Aquash, 2013). Literature that defines and outlines macrosystems is scant. Understandably, assessing nationwide beliefs is both practically and theoretically challenging. However, Willows et al., (2012) confer in drawing on histories to assess these overarching prototypes that form the macrosystem.

Prototypes impacting Black Canadians

Drawing on histories, some prototypes may be uncovered. In particular, the Trans-Atlantic slave trade's role in the creation of the nation state (Dryden & Nnorom, 2021) situated Black Canadians as objects to be owned rather than on par with White Canadians. Beliefs around Black Canadians today reflect a lack of understanding and portray the population as homogenous (Mensah, 2014). Further, the quantity of literature on race and racism (Baker et al., 2001; Beagan, 2021; Beagan & Etowa, 2009; Stirling-Cameron & Jefferies, 2021; Dryden & Nnorom, 2021; Emery, 2020; J. Etowa et al., 2007; Etowa et al., 2009; Harris et al., 2019; Nelson, 2002; Okoye & Saewyc, 2021) implies the existence of overarching prototypes that play an role in the development of racism enacted through systems, institutions, and interpersonal interactions.

Prototypes impacting people living with obesity

Tying weight prototypes to the creation of the nation state is a more challenging task; however, there is literature exploring the culture around weight and what prototypes drive the systems and institutions of the nation state. For example, Kwan (2010) suggests a defined, gendered versions of the ideal body in Western Culture – thin women and muscular men. These are the ideal prototypes that govern attitudes towards an individual's body. Deviance from these prototypes, in the form of overweight or obesity, is labelled “abnormal” as in the World Health Organizations definition of obesity (World Health Organization, 2020).

Deviance from the expectations of one's body creates a counter-prototype that is othered and subjected to devaluing. On the weight oppression continuum, weight stigma and bias may be recognized as macrosystem prototypes. Weight bias literature has indicated that dominant discourse and perceptions label those living with overweight or obesity as lazy, lacking willpower, and lacking self-control (Kirk et al., 2020). Attribution theory literature suggests that these negative discourses arise from the ideology that weight is under personal control (Crandall, 1994; Puhl & Brownell, 2003). However, this theory focuses on individual's motivation to seek cause and effect, negating how forces beyond the individual may influence the creation of prototypes.

The perspective that weight is under personal control reflects a dichotomy of public and private in Western cultures. Either the body is under the control of the public (that is the Government), or the body is under private control (e.g., the individual). A prototype foregrounding personal control leads to a lack of government protection for individuals who may be exposed to manifestations of weight oppression. Specifically,

body shape or size is not a protected characteristic in the Canadian Human Rights Act (R.S.C., 1985, c. H-6).

Exosystem and mesosystem manifestations of prototypes

Exo- and mesosystems represent the interconnectedness of settings (e.g., school, hospital, workplace), that are situated in the microsystem, through informal and/or formal structures (Bronfenbrenner, 1977). The interactions between settings influence and impact how the individual is perceived and acts in the microsystem. For example, police searches represent an exosystem policy that may be enacted in varying settings therefore the perceived threat, or actual presence of police may influence how an individual acts in the mall. Anti-Black racism represents an exosystem and mesosystem of oppression due to its extended reach and pervasiveness.

Anti-Black Racism

Systemic anti-Black Racism is a social structure that reaches across multiple settings to impact the microsystems in which Black Canadians lives their everyday life. Its pervasiveness has led to the calls for recognition of anti-Black racism as a Public Health crisis in Ontario, Canada (Dryden & Nnorom, 2021). Further, the United Nations Working Group of Experts on People of African Descent (2017) is “deeply concerned about the human rights situation of African Canadians (p.3).” The history of anti-Black racism in Canada is rooted in the slave trade and has manifested itself through legislation and practices that promote and enforce educational, housing, employment, etc. segregation (Descent & Secretariat, 2017; Okoye & Saewyc, 2021). Anti-Black racism is so deeply entrenched in hegemony that it is often invisible and functionally normalized, particularly to the dominant group (Descent & Secretariat, 2017). Racism’s entrenchment

into hegemony in Canada is an insidious oppression due to both its historical and ongoing nature and its pervasive reach across Canadian systems and structures.

The absence of race-based data collection is a manifestation of anti-Black racism as a mesosystem and exosystem. The interrelations between varying settings that lack race-based data collection results in a collective social structure that does not fully understand the implications of systems of oppression on Black Canadians. For example, Canada does not systematically collect and report on race and ethnicity in the criminal justice system (Moscher & Mahon-Haft, 2010). Proponents for and against the systematic collection of race and ethnicity data in the criminal justice exist (Reasons et al., 2016). Those against, highlight poor quality of statistics, difficulty measuring race, and the use of statistics to support racist theories as reasons for not collecting data (Reasons et al., 2016). Conversely, proponents of race and ethnicity data argue that the absence of quality data restricts evidence-informed decision-making and resource allocation through rendering the disproportionate burden of the criminal justice system on Black Canadians invisible.

The healthcare setting is another example that does not regularly collect race-based data (Chiu, 2017; Davis-Murdoch, 2022). The lack of race-based data collection has been posited as a driver of the disproportionate impact of the COVID-19 Pandemic on Black Canadians (Ahmed et al., 2021). Further, Chiu (2017) argues that without routinely collecting race-based data, it is difficult to identify gaps and disparities in service provision. An inability to identify gaps and disparities inevitably impairs the ability to create an evidence base to inform policy, intervention, and program development to address health inequity.

Weight oppression

Various interrelations between systems may impact an individual living with overweight or obesity. Mass media is one representation of an exosystem that enforces weight oppression. In fact, entertainment media, news media, and advertising have all been found to perpetuate weight bias (Ata & Thompson, 2010; Puhl & Heuer, 2010). Perpetuations of weight bias in the media include portrayals of people living with overweight or obesity as objects of humour and ridicule (Greenberg et al., 2003; White et al., 2009), simplifying obesity to solely an issue of personal responsibility (Bonfiglioli et al., 2007; Kim & Willis, 2007; Lawrence, 2004), and underrepresenting characters living in larger bodies in entertainment media (Fouts & Vaughan, 2002; Greenberg et al., 2003; Klein & Shiffman, 2005; Robinson et al., 2008).

Evidence on the prevalence of weight discrimination, bias, and stigma in Canada is scant, indicating data collection as an exosystem that impacts the lives of those living with obesity. For example, Obesity Canada's Clinical Practice Guidelines use of United States data on the prevalence of weight discrimination is an indication of the lack of such data in the Canadian context (Kirk et al., 2020). However, some data do exist (Godley, 2018; Gupta et al., 2020). Godley (2018) analyzed nationally representative data from the 2013 Canadian Community Health Survey (CCHS) to examine self-reported everyday discrimination. The results indicate that the prevalence of weight discrimination is 2.79% in Canada. Using the same data, Gupta et al., (2020) analyzed experiences of discrimination in the healthcare setting. Original data from the "everyday discrimination" module (n = 19876), was limited to adults over 18 and those with responses to all variables of interest (n = 16,340). Results indicate 6.4% of Canadians have experienced

discrimination in a healthcare setting and those classified as “obese II and III” (BMI \geq 35kg/m²), compared to those classified as “not obese” (BMI < 30kg/m²), were significantly more likely to report discrimination in a health care setting (e.g., physician’s office, hospital, walk-in clinic). However, weight discrimination was not isolated in this study and therefore a prevalence could not be reported. Although both studies point to weight discrimination being prevalent in Canadian contexts, they provide incomparable results.

These studies highlight issues with data on weight discrimination in the Canadian context. Firstly, the rapid response module on everyday discrimination was conducted for the first time in 2013 and has not been conducted since resulting in unknown changes over time and data that is nearly 10 years old (Gupta et al., 2020). Secondly, vigilance and minimization bias may confound both studies (Godley, 2018; Gupta et al., 2020). The lack of data and its questionable quality examining weight discrimination in the Canadian context renders such oppression invisible.

Microsystem manifestations of prototypes

Microsystems constitute the immediate surroundings of the individual (e.g., the school, healthcare, family and friends) (Bronfenbrenner, 1977). Given this, settings (microsystems) literature is more common than broader systems and often provides a look into how the prototypes trickle down through the layers of society to impact an individual. Prototypes often manifest as discrimination across the settings and individual interacts with. For example, weight-based bullying in the school setting (Puhl et al., 2016), perceived race discrimination among homeless adults (Skosireva et al., 2014), and racism in school settings (Baker et al., 2001).

Microsystems Impacting Black populations

Restricted access to opportunities in education, healthcare, housing and employment is manifestation of oppression of Black Canadians within the microsystem (Descent & Secretariat, 2017). Education is both a human right and an important social determinant of health (Jean-Pierre et al., 2021), thus the education settings act as a key contributor to oppression. Anti-Black racism is pervasive within the education settings in Canada evidenced in “disproportionately low educational attainment, high dropout rates, suspensions, and expulsions (Descent & Secretariat, 2017).

Health Care Settings. Healthcare is one setting that has been reported to impact the everyday lives of Black Canadians (Cénat et al., 2023; Skosireva et al., 2014). Skosireva et al., (2014) examined perceived discrimination in a sample of ethnically diverse unhoused adults in healthcare settings using data from the Toronto site of the At Home/Chez Soi randomized control trial of Housing First for homeless adults (n= 550). It is reported that “only” 15% of participants reported discrimination due to race/ethnicity/skin colour. Skosireva et al. (2014) also report that no difference between perceived discrimination based on race/ethnicity/skin colour were observed between Black participants and “Other” (other ethnic minority) participants. While the study notes perceived discrimination in the healthcare setting for Black unhoused adults, there is no information on frequency and extent of perceived discrimination.

A recent cross-sectional survey that employed peer research associates, provides further evidence to the impact of healthcare settings on Black Canadians everyday lives (Cénat et al., 2023). Cénat et al., (2023) reported links between major racial discrimination in a healthcare setting and vaccine mistrust. This study used the COVID-

19 vaccine mistrust subscale of the COVID-19 vaccine confidence and mistrust beliefs scale (Bogart et al., 2022). The study finds that racial discrimination in the healthcare setting plays a major role in developing vaccine mistrust. In fact, experiencing racial discrimination countered the protect power of health literacy in developing vaccine mistrust (Cénat et al., 2023).

School Setting. Racial discrimination has been documented in the school setting and negatively impacts students experiences (Baker et al., 2001; Hamilton-Hinch et al., 2021). Experiences in the school setting include racist name-calling, lower teacher expectations, and alienating environments (Codjoe, 2007; James, 2012; Livingstone et al., 2014; Sefa Dei, 2008).

Baker et al., (2001) posited a three-phase model detailing the impacts of experiences of racism by 25 Black and Indigenous adolescents and 14 parents of the adolescents in New Brunswick – from *splintered universe to disengagement*. Phase 1, *splintered universe*, often was a result of first exposure to racism, often occurring in early schooling, and resulting in a state of shock. *Spiralling resistance* is a phase focused on retaliation. An increasing association between historic and current experiences of racism prompted recipients to retaliate, firstly through direct retaliation (e.g., hitting), secondly through preventative retaliation (e.g., verbal threats), and finally generalized retaliation (i.e., experiencing racism prompted a violent reaction as it was viewed in a life-long context). Finally, *disengagement*, represented a sense of hopelessness and disconnection from society. This process was a product of pervasive and detrimental experiences of racism for adolescents as they developed.

Hamilton-Hinch et al., (2021) conducted a study exploring African Nova Scotian student achievement from the perspective of parents. Through focus groups, they identified four themes that ran through the dominant story of *Our families' experiences in school*. Participants noted being treated (e.g., receiving negative comments, being excluded, or being falsely accused) differently as a consequence of racism in the school environment. ANS Parents also felt disconnected and lacking a sense of belonging that arose from not being provided pertinent information about their child. Further, parents noted a lack of culturally relevant resources/curriculum that reinforced a lack of a sense of belonging in the school. In efforts to counteract racism manifest, parents actively engaged in their children's education by establishing communication with teachers and engaging in school events.

Interestingly, Hamilton-Hinch et al., (2021) note a different end mechanism for coping with racism in the school environment for parents compared to the adolescents (Baker et al., 2001). While adolescents phased from shock to hopeless disengagement, parents of students resisted through strengthening engagement and communication with the school setting to support their children. The two studies highlight how over time, Black Canadians adapt their response to racism in the school setting from one of disengagement to one of resistance.

Microsystems Impacting People Living with Overweight or Obesity

Weight oppression works through institutions and settings that constitute the microsystem (Puhl & Brownell, 2003; Puhl & Heuer, 2009). For example, the workplace (Pagán & Dávila, 1997; Register & Williams, 1990), education settings (Puhl et al., 2016), and healthcare (Forhan et al., 2013; Puhl et al., 2021).

Healthcare Settings. Weight discrimination has been explored and documented in the Canadian health setting (Alberga, Edache, et al., 2019; Alberga et al., 2016; Alberga, Nutter, et al., 2019; Kirk et al., 2014). Reproductive healthcare has been a focus of weight discrimination research (Bombak et al., 2016; LaMarre et al., 2020), perhaps in part due to the gendered nature of weight bias. Bombak et al., (2016) reported that women living with obesity seeking reproductive health services described experiencing over discrimination (e.g., name calling, expressions of disgust, and inadequate provision of care). LaMarre et al., (2020) also reported weight stigma impairing women and trans men's access to appropriate reproductive health care.

The impacts of weight discrimination extend beyond reproductive care and impact people living with overweight or obesity more generally. Forhan et al., (2012) identified issues with primary care engagement in a sample of 11 Canadian individuals living with obesity and seeking healthcare using face-to-face interviews. Participants in this study noted barriers to healthcare utilization including feeling judged, poor communication, lack of privacy, and limited provider knowledge. Limited provider knowledge may be a microsystem manifestation of the macrosystem dichotomy of public and private. That is, the public world of politics and the private world of family, economic relations, personal identity and free will (Chandler & Munday, 2011). The hegemonic belief that weight is a personal issue may impact providers' willingness to seek further training regarding weight management. Kirk et al., (2014) support the barrier of limited provider knowledge, suggesting that effective obesity management does not currently exist.

School Setting. Bullying plays a pertinent role in the school setting for children living with overweight or obesity. A multinational cross-sectional survey including adults

in the United States, Canada, Iceland, and Australia (n = 2866) highlighted the prevalence of weight victimization in the school setting. Puhl (2016) reported that weight-based bullying was “by far” the most frequent form of bullying experienced in schools. Canadian participants reported the highest weight bias victimization experienced by the participant across all countries (Puhl, 2016). Ashrafi et al., (2020) identified three groups of victimized students in a study of 3,829 students in Saskatoon, Saskatchewan: aggressively victimized (7.2%), moderately victimized (34.6%), and non-victimized (58.2%). The study indicated that younger age and being overweight was associated with a higher likelihood of bullying victimization. That is, students living with obesity were more likely to experience bullying.

Janssen et al., (2004), in a representative sample of 5749 Canadian school-aged children, uncovered similar trends. This study noted a relationship between BMI and peer victimization such that an increasing BMI category increased the odds of being bullied. This study reported strong significant associations for covert (e.g., name-calling) and relational victimization (e.g., withdrawing friendship). Further, the study notes that 15- to 16-year-old boys and girls living with overweight or obesity were more likely to perpetrate bullying than their normal weight peers; this association was not noted in the 11- to 14-year old students. This may suggest the evidence of *spiraling resistance*, similar to that of Black and Indigenous students experiences of racism (Baker et al., 2001).

Health of Black Canadians

In the Canadian context, data on Black Canadians is often amalgamated into the federally recognized category of “visible minorities” – a classification stemming from the

Employment Equity Act. Data specifically on the health of Black Canadians is scarce (Etowa et al., 2007; Ramraj et al., 2016). Comparisons to the United States are often made in an effort to fully understand the health status and social determinants of health for Black populations in Canada (Etowa et al., 2007; Ramraj et al., 2016; Siddiqi et al., 2009). Certain comparisons suggest that health inequalities between White and non-White populations in Canada are smaller than in the United States (Lasser et al., 2006; Ramraj et al., 2016; Siddiqi et al., 2009). In some cases findings indicate the virtual absences of health differences between Whites and non-Whites in Canada (Siddiqi & Nguyen, 2010). Ramraj et al., (2016) indicate that the evidence base for such claims is limited due to weak power for statistical analysis, single-wave data cycles, and the inability to parse out finer-racial categories. Thus, while amalgamated racialized data indicate an absence of differences between White and non-White data, it isn't feasible to draw conclusions on Black Canadian health from such data.

While health status and health inequalities may be absent in examinations of White vs non-White populations, disaggregated data for Black Canadians indicates a different reality. An analysis of nine cycles of the CCHS found that Black women and men were more likely to report diabetes and hypertension than their White counterparts (Veenstra & Patterson, 2016). Furthermore, Black men were less likely to report heart disease than White men and Black women were less likely to report cancer and fair/poor mental health. Veenstra and Patterson (2016) suggest high rates of hypertension and diabetes may stem from racism in everyday life, low rates of cancer and heart disease represent survival bias, and low rates of fair/poor mental health represents a paradox similar to one in African Americans. Patterson and Veenstra (2016) explored ten cycles

of CCHS data to examine Black-White health inequalities at the intersection of gender and immigrant status. Analysis indicated that immigrant Black women's odds of hypertension, diabetes, and fair/poor self-rated health were significantly higher than immigrant White women; native-born Black women and immigrant Black men had higher odds of hypertension and diabetes than native-born White women and immigrant White men; and native-born Black men and White men had no statistically significant health differences. Findings from this study indicate that immigrant status, gender, and race did not intersect in a synergistic way to determine health. That is, the sum of the parts (the three social categories) was not equal to the whole. Data from iterations of the CCHS indicate that Black health is more complex and nuanced than a simple Black-White dichotomy. This further adds to the understanding that health differences between Black and non-Black populations are not inherent but resulting from social and structural conditions (Paradies, 2006).

Impacts of weight oppression on health.

The data on the impacts of experiencing weight oppression indicate detrimental physical and mental health outcomes as well as increased mortality (Hatzenbuehler et al., 2009; Pascoe & Smart Richman, 2009; Sutin et al., 2015; Sutin & Terracciano, 2017; Udo et al., 2016). Specifically, experiencing weight discrimination leads to greater depressive symptoms (Scmitt et al., 2014), an increase in mortality of nearly 60% (Sutin et al., 2015), decreased functional mobility (Schafer & Ferraro, 2011), and higher circulating c-reactive protein (Sutin et al., 2014).

A wide range of forms of discrimination are robustly associated with negative and mental health outcomes (Kessler et al., 1999; Pascoe & Smart Richman, 2009). An

analysis of a subsample of individuals with overweight and obesity (N = 22,231) from the National Epidemiological Survey on Alcohol and Related Conditions (NESARC) found a strong relationship between perceptions of weight discrimination and current psychiatric and substance use disorders (Hatzenbuehler et al., 2009). Adjusting for BMI did not influence the association between weight discrimination and prevalence of psychiatric morbidity and comorbidity, suggesting that weight discrimination is harmful to health independent of weight. A study of community and university women who were either currently overweight (NOW), formerly overweight (FOW), or stable average weight found associations between experiences of weight stigmatization, using the Stigmatizing Situation Questionnaire – Extended (SSQ-E), and psychosocial functioning (Natasha Milkewicz Annis et al., 2004). Specifically, in the NOW cohort, experiences of weight stigmatization were associated with low self-esteem, higher social anxiety, greater depression, lower life satisfaction, and greater binge eating; the FOW group results indicated childhood experiences of stigmatization were associated with lower social self-esteem and great social anxiety, but no other psychosocial measures. Further, stigmatizing experiences in adolescents and adulthood were not significantly associated with any psychosocial measures.

Chapter Summary

This chapter provides an overview of the available literature on race and weight across the systems of Bronfenbrenner’s model. Macrosystem prototypes for race have endured from the foundations of the nation state until the modern day. That is, colonialism, imperialism, and the slave trade shaped macrosystems for Black Canadians in such a way that devalues and others them. Historical lineages for weight prototypes are

harder to distinguish; however, Western cultures strongly position thin women and muscular men as hegemonic norms. Thus, excess weight is positioned as a deviant counter-prototype that results in stigmatization. Anti-Black racism and weight stigma act as meso- and exosystem forces that impact the everyday lives of Black Canadians living with overweight or obesity. Pertinent in these systems is the lack of systemic data collection mechanisms. Microsystems manifest the prototypes of macrosystems through discrimination in the immediate settings within which an individual resides. The trickle-down effect of macrosystem norms and prototypes results in health disparities for Black populations and those living with overweight or obesity.

Chapter Three: Methodology and Methods

The evolution and strengthening of the qualitative research approach has weakened the *need* to justify the implementation of qualitative methods and consequently defend its value and worthiness (Creswell & Creswell, 2018). However, the absence of necessity does not negate the utility of explanation, particularly if the theoretical underpinnings of a study are emerging or underutilized. Qualitative research methods allow researchers to uncover, discover, and develop understandings of the meaning(s) individuals prescribe to social and human problems and contexts (Creswell & Creswell, 2018; Starks & Brown Trinidad, 2007). Basic characteristics of qualitative methods include the researcher as an integral and continuous actor, inductive and deductive data analysis, emphasis on the meaning that the participant's hold, and concerted effort to develop complex and rich understandings (Creswell & Creswell, 2018). This chapter explores the philosophical worldview and the theory driving this research study and outlines the methods that were used for this study. Firstly, phenomenology is discussed as the design; followed by acknowledgement of the role the researcher in the study. Finally, the chapter contextualizes the study further by providing an overview of the setting, participants, process, ethical considerations, data collection strategies, data analysis procedures, and approaches used to maintain and uphold qualitative rigor.

Philosophical Worldviews

Worldviews are the general philosophical orientations about reality and the nature of *things* that researchers bring to the study (Creswell & Creswell, 2018). Essentially, the lens through which the researcher perceives the world. These lenses have assumptions about the nature of reality and the nature of knowledge – assumptions that are often

invisible throughout the research process (Creswell & Creswell, 2018; Tenny et al., 2023). For example, quantitative research is governed by a positivist worldview – a belief that an objective truth exists and through the scientific method it can be found (Tenny et al., 2023). Despite arguments for strict adherence to ‘one way or the other’, rigid epistemological and ontological assumptions create oppositional and exclusionary boundaries of reality rather than an understanding that acknowledges the multiplicity of experience and perspective that is reflective of *reality*. For this reason – and the fact that as a researcher my worldview is fluid and evolving – rigid constructs of philosophical worldviews are not discussed nor adhered to in this study.

Pragmatism

Pragmatism owes its roots to several authors including Peirce, James, Mead, and Dewey (Creswell & Creswell, 2018; Morgan, 2014). Rudimentary applications focus on “what works”; that is, a focus on solutions and actions to solving problems. Problem solving applications of pragmatism have typically lent themselves to mixed methods research due to the complex nature of inquiry (Morgan, 2014). However, Morgan (2014) argues this basic focus undermines pragmatism’s complexity and limits its utility. Drawing on the work of Dewey, Morgan (2014) reconceptualizes pragmatism as a paradigm with utility beyond mixed methods research and for the social sciences. Pragmatism as a worldview extends *to and beyond* problem solving and may be reoriented to emphasize human experience and inquiry as a foundation for research (Morgan, 2014).

Human experience can be understood as a reciprocal relationship between our beliefs and actions (Morgan, 2014). Dewey’s concept of experience is rooted in two

inseparable questions: What are the origins of our beliefs? And what are the meanings of our actions? The relationship between beliefs and actions (experiences) are always fostered by a process of interpretation. That is, interpreting beliefs creates actions, and vice versa. The perpetuality of the relationship results in *habit* – the unquestioned process of interpretation. Contrary to habit, *inquiry* is a process of conscientious decision making. Further, experiences (whether habit or inquiry) are context dependent; therefore, the ability of beliefs to predict outcomes of actions isn't guaranteed. Thus, the mechanism that triggers the perpetual relationship between beliefs and actions (i.e., the mechanisms guiding experiences forward) is the probabilistic nature of our predictive capabilities. Inquiry, as a form of experience, is a pathway that allows investigation of such problems. Dewey's systematic approach to inquiry involves five steps:

1. Recognizing a situation as problematic;
2. Considering the difference it makes to define the problem one way rather than another;
3. Developing a possible line of action as a response to the problem;
4. Evaluating potential actions in terms of their likely consequences;
5. Taking actions that are felt to be likely to address the problematic situation.

As a type of experience, inquiry is not a process that is independent of beliefs and actions, but rather, intermingled with the two throughout its undertakings. That is, inquiry is susceptible to multiple cycles from beliefs to actions and back before a resolution (an outcome action) is determined for the matter of inquiry. Ultimately, Dewey's pragmatism, addresses the question: What is the nature of human experience?

This emphasis on human experience aligns well with the qualitative research. Creswell and Creswell (2018) define qualitative research as “an approach for exploring and understanding the meaning of individuals or groups ascribe to a social or human problem (p.4).” Pragmatism’s focus on the nature of human experience implies an element of exploration, aligning well with Creswell and Creswell’s definition. Further, qualitative research focuses on individual meaning – a focus that aligns well with Dewey’s question pertaining to the meaning of our actions (Creswell & Creswell, 2018; Morgan, 2014). Finally, pragmatic inquiry begins with the identification of a problem and proceeds through a process of exploring and understanding to give rise to an outcome, a process not dissimilar to that of qualitative research.

Conceptual Framework

This section outlines the two models that form the conceptual framework for this study. Firstly, intersectionality’s core components are broken down and explored as praxis and inquiry. Secondly, Bronfenbrenner’s socioecological model and its adaptations are discussed. Finally, an exploration of the hybridization of these models is explored to situate how it drove this study.

Intersectionality

Over the past two decades, intersectionality has gained traction within research, politics, social justice movements, and other settings that tackle social problems (Hill Collins & Bilge, 2020). Hill Collins and Bilge (2020) provide a general description of intersectionality:

Intersectionality investigates how intersecting power relations influence social relations across diverse societies as well as individual experiences in everyday life. As an analytic tool, intersectionality views categories of race, class, gender, sexuality, nation, ability, ethnicity, and age – among others – as interrelated and mutually shaping one another. Intersectionality is a way of understanding and explaining complexity in the world, in people, and in human experience. (p. 2)

As suggested, intersectionality is used as an analytic tool to better comprehend and address social issues. For example, the feminist, antiracist, and worker's rights movements of the 1960s and 70s in the United States, failed to encapsulate the needs of Black women (Hill Collins & Bilge, 2020). Crenshaw (1989) contests that Black women were seen as too much like women or Blacks and their compounded experience is absorbed into collective agenda of these movements, or too different and their Blackness or femaleness is segregated to the margins of the respective agendas.

The origins of intersectionality are often attributed to Kimberlé Crenshaw (Crenshaw, 1989; Hill Collins & Bilge, 2020); however, intersectional praxis existed prior to the incorporation of intersectionality as critical inquiry into modern academia and scholarship. The phenomenon is neither recent nor limited to North American or European contexts (Hill Collins & Bilge, 2020). For example, Savitribai Phule (1831 – 97) a modern Indian feminist used intersectional perspectives in her anti-caste and women's rights advocacy, and the Black women's movement in Brazil, beginning with the deliverance of *The Manifesto of Black Women* to Congress in Brazil in 1975 (Hill Collins & Bilge, 2020). Recognizing pre-academia intersectional work and understanding the contributions made by those outside of academia is a pertinent step in

intersectional work – recognizing its social justice core and the dilution of intersectionality as a result of its institutionalization.

Central Concepts of Intersectionality. Intersectionality's current form as an analytic tool comprises six core ideas: social inequality, intersecting power relations, social context, relationality, complexity, and social justice (Hill Collins & Bilge, 2020). Intersectional perspectives acknowledge social inequality is rarely a product of singular factors, acknowledging social inequality is a product of multiple interactions among varying categories of power. That is, intersectionality recognizes the multiplicity of reality. Power relations are another central idea for intersectional inquiry. Pertinent to intersectionality is analyzing power relations at specific intersections (sexism, racism, capitalism, etc.) as well as across the domains of power (structural, disciplinary, cultural, and interpersonal). For example, exploring what it means to be overweight within Black culture and how does that align or contradict with hegemonic meanings. Thirdly, intersectionality emphasizes the importance of analyzing the social context, with particular attention to power relations. This may pertain to both the construction of social meaning and the application of social meanings. Fourthly, intersectionality embraces the interconnections between social categories rather than seeing them as contrasting, that is, intersectionality is relational as it recognizes connections between social categories. For example, being Black and being White are not juxtapositions but intricately related in the constructions of reality. Furthermore, race alone does not construct reality for an individual, the interconnections of multiple overlapping social categories (e.g., race, socioeconomic status, and sexual orientation) create lived experience. Fifth, intersectionality, when used as an analytic tool, seeks to understand and analyze the

complexity in the world. An important distinction that needs to be made is that complexity is not an achievement of intersectionality but rather a method of deepening intersectional analysis. That is, increasing complexity provides deeper, richer, and fuller analysis of the topic of inquiry. Finally, intersectionality's application as a critical analytic tool is made possible by its connections to the social justice ethos. However, this may be contentious as the social justice lens can be overlooked due to hegemonic ideology that social ideals are already achieved (Hill Collins & Bilge, 2020).

Intersectionality as Critical Inquiry and Critical Praxis. Intersectionality typically arises as critical inquiry and critical praxis when applied as an analytic tool (Hill Collins & Bilge, 2020). Historically, intersectionality's criticality arose from challenging hegemony; however, its indoctrination in academia has diluted this contestation in part due to the separation of politics and academic institutions. Intersectionality's growth throughout the twenty-first century can be attributed to adoption into academia. The academic setting prefaces intersectionality as a form of critical inquiry, that is, the use of intersectional framework to study social phenomena across a variety of social settings (e.g., local, regional, national, and global). As critical praxis, intersectionality is the application of intersectional frameworks to instances of everyday life. The distinction here is praxis aims to transform power relations and challenge hegemonic ideology whereas inquiry predominately generates knowledge and understanding.

The Socioecological Model

Urie Bronfenbrenner is credited with the origins of the socio-ecological model, with his conceptual writings in *Toward an Experimental Ecology of Human Development*

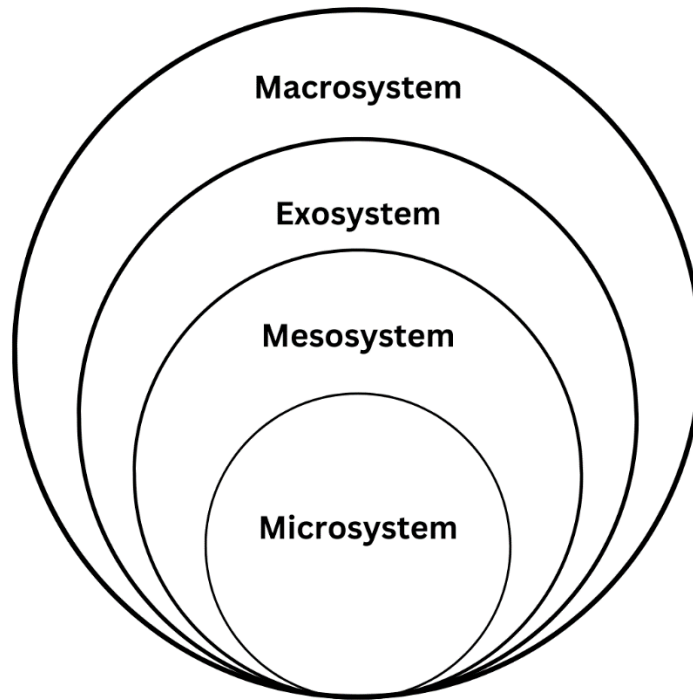
(Kilanowski, 2017). Bronfenbrenner contested that the prevailing approaches to research on human development were fundamentally limited (Bronfenbrenner, 1977). Specifically, ecological research had diverged down two paths one that seemingly overemphasized rigor, and another that stressed social relevance often with an indifference to rigor. Overemphasis on rigor resulted in experiments that “involve situations that are unfamiliar, artificial, and short-lived and that call for unusual behaviours (p. 513).” The second path, emphasizing social relevance, went so far as to entirely exclude scientists from the research process, or processes that valued experience over observation and personalized understanding over analysis. Bronfenbrenner proposes the ecology of human development as an evolving scientific perspective to address limitations and progress scientific knowledge in a more complete manner. The ecology of human development is defined as:

The scientific study of the progressive, mutual accommodation, throughout the life span, between a growing human organism and the changing immediate environments in which it lives, as this process is affected by relations obtaining within and between these immediate settings, as well as the larger social contexts, both formal and informal, in which the settings are embedded (p. 514).

The perspective posited four systems nestled topologically within what is labelled an ecological environment (see *Figure 1*). Furthermore, nine propositions were outlined that distinguish and determine what could be considered an ecological approach.

Figure 1

Bronfenbrenner's Model for the Ecological Environment (Commonly Known as the Socioecological Model)



Ecological Experiments of Human Development. Bronfenbrenner's original work noted four systems that comprised the ecological environment in which human development occurs (Bronfenbrenner, 1977). Firstly, the microsystem comprises the immediate setting containing an individual. For example, a child's behaviour in the home setting. Secondly, the mesosystem is the relations between major settings that the individual is contained within, at a given period in the individual's life. For example, for a child it may include interactions among school, family, and peers. Thirdly, the exosystem – acting as an extension of the mesosystem – encompasses social structures that do not themselves contain the individual but impinge upon the immediate settings that

contain the person. Finally, the macrosystem that pertains to “general prototypes, existing in the culture or subculture, that set the pattern for structures and activities occurring at the concrete level (p. 515).” These systems form the categorical basis for understanding the interconnections between an individual and the ecological environment in which it develops.

Given the definition of the ecological environment and its nested systems, Bronfenbrenner (1977) turns to conceptualizing how these interdependencies can be empirically investigated. Ecological experiments are posited as the foundation for such investigation:

An ecological experiment is an effort to investigate the progressive accommodation between the growing human organism and its environment through a systematic contrast between two or more environmental systems or their structural components, with a careful attempt to control other sources of influence either by random assignment (contrived experiment) or by matching (natural experiment) (p. 517).

It is noted that the experiment plays a critical role in ecological investigation as it tests hypotheses and detects and analyzes system’s properties. However, this is not to discredit other methods but rather to highlight the value of experimental paradigms in ecological research. Discovery, the identification of system’s properties and their interrelations with the individual within the system, is posited as the primary purpose of the ecological experiment. Due to inherent complexity of human environments and human beings and their capacity to adapt, it is suggested a focus on systems is required to capture the interactions.

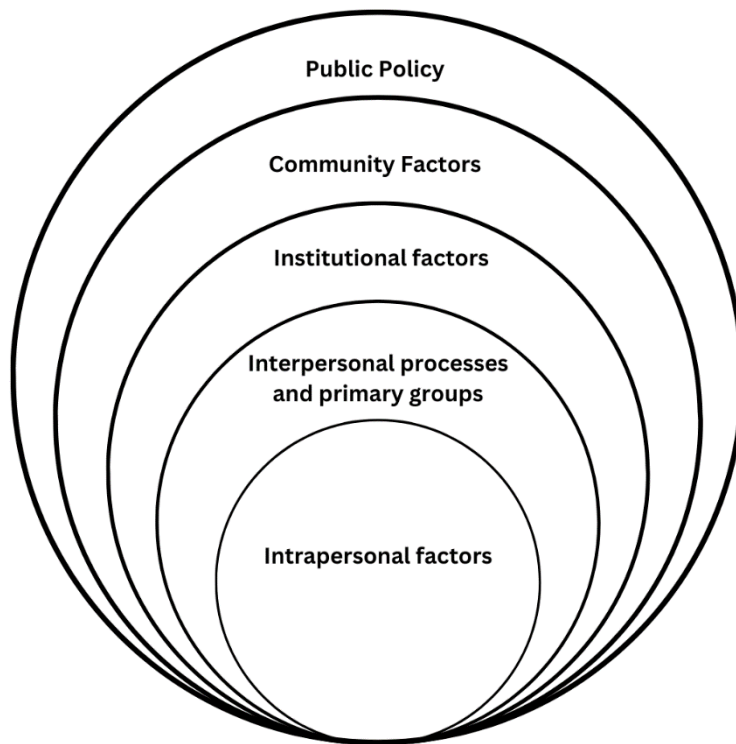
Adaptation of Ecological Models to Health Promotion. Not dissimilar from other theories, Bronfenbrenner's original model for ecological approaches to human development evolved and was adapted to suit varying fields of research (Bronfenbrenner, 1977, 1986; Bronfenbrenner & Ceci, 1994; Bronfenbrenner & Morris, 2007; McLeroy et al., 1988). McLeroy et al., (1988) posited an ecological model for health promotion frameworks that is commonly adopted in the field (Cardon et al., 2012; Chung et al., 2018). The model is premised in contention to dominant lifestyle interventions at the transition from a public health focus on infectious disease to focus on health promotion and disease prevention in the context of chronic disease. Further, it is suggested psychology's major contributions to the literature on health programs has resulted in a persistent risk of innovative health promotion work neglecting social causation of disease through emphasis on individuals and personal choice. Ecological models are positioned as an approach to counter lifestyle interventions and thus the victim blaming nature of traditional programs.

The model proposed by McLeroy et al., (1988) is a variation of Bronfenbrenner's model (see *Figure 2*). The model suggests that behaviour is determined by intrapersonal factors, interpersonal processes and primary groups, institutional factors, community factors, and public policy. Each level, progressively broadening the social sphere of influence on the individual and influence the individual exerts – these are McLeroy and colleagues' equivalencies of the ecological systems outlined by Bronfenbrenner (1977). Intrapersonal factors are factors contained within the individual. For example, physiological processes, knowledge, and self-concept. Interpersonal processes include individual's social networks and social support such as family and friends. The

institutional level includes both organizational structures and informal and formal regulations. Community factors include organizations and institutions; however, focus on the relationships that exists between these physical structures within defined ‘community’ boundaries. Finally, the policy level constitutes formalized laws and policies at all governmental levels.

Figure 2

McLeroy’s Adaptation of the Socioecological Model for Health Promotion Programs



Hybridization.

Hybridization is a chemical process in which atomic orbitals are combined to produce orbitals that are properly oriented to form bonds (LibreTexts, 2020). In such instances, the development of the covalent bonds leads to structural advantages. Coopting

the term from chemistry, it is applied here to the adoption of multiple frameworks for understanding health promotion issues – a method presumed to provide more complex and intricate understandings of manifestations of health status (Seng et al., 2012). With reference to the hybridization of intersectionality and socioecological models there is a dearth of literature. Given intersectionality alone has been understudied and underutilized for understanding health promotion, this is hardly a surprising finding (Heard et al., 2020). The literature that does exist covers a broad range of topics and their intersections including mental health (Seng et al., 2012), gender-based violence (Rieger et al., 2021), sexual health (Lee-Foon et al., 2020), handwashing behaviour (Lanfer & Reifegerste, 2021), etc. Notably, no overlapping literature could be found that described the application of hybridization of intersectionality and SEM to the same health issue. Given that intersectionality embraces complexity of individual's identities, and the socioecological model embraces complexity across social and ecological domains, it is interesting that minimal research has hybridized these complementary theoretical frameworks.

Existing literature on hybridized models. Despite minimal literature exploring the hybridization of intersectionality and the socioecological models, examples do exist. The application of both models to health issues varies greatly depending on the study. Further, hybridization predominately takes the form of modified SEM models with intersectional undertones. For example, Rieger et al., (2021) interweaves intersectional analysis across the levels of the SEM (individual, relationship, community, and societal). Intersectionality is used as a lens to emphasize how social location influences experiences, while situated within the levels of the SEM that denote systems of influence

and impact (Rieger et al., 2021). Lee-Foon et al., (2020) hybridize the two theories in a similar manner, using intersectionality to explore how overlapping social locations intertwine with socio-ecological levels (individual, interpersonal, community, institutional, and public policy).

In addition to the above hybrid models, Lanfer and Reifegerste (2021) position intersectionality at the forefront of their analysis of handwashing behaviour in Sierra Leone. The SEM was used to categorize the multiple determinants of handwashing behaviour at the individual, social, and structural level. Intersectionality was used to explore what social identity dimensions influence and to determine the impact of social locations on handwashing behaviour. The application of intersectionality to assess two-thirds of the research questions allows for an analysis that highlights non-uniformly experienced social inequalities with respect to handwashing.

Seng et al., (2012) adopted an approach that foregrounds developing empirical evidence from an intersectional lens. Intersectionality was conceptualized within the levels of the socio-ecological model (macro-system, exo-system, meso-system, and micro-system), indicators were delineated, and databases were searched for ways in which these indicators were operationalized. For example, meso-system or interpersonal experiences (such as everyday discrimination) act as mediators between intersecting identities and health disparities. Hybridization in this way posits intersectionality at the forefront, similar to Lanfer and Reifegerste (2021). However, SEM levels are loosely used here to structure indicators of intersectionality at societal levels, rather than informing analysis through knowledge generation.

Critique of current hybrid models. Current hybridization of intersectionality and the socioecological model continues to pave the way for critical frameworks that provide deeper understandings of singular approaches to health promotion issues. However, these models are not without limitations. Most prominently, there is not uniformity in the application of hybrid models (Lanfer & Reifegerste, 2021; Lee-Foon et al., 2020; Rieger et al., 2021; Seng et al., 2012). Whether intersectionality or socioecological perspectives dominate study design and analysis is neither considered, nor addressed in the located hybrid studies. Another limitation of the current studies is the varying conceptualization of the levels of the SEM; without a common understanding of the levels of the SEM it may be unclear how intersecting identities and power structures across societal levels should be examined. Finally, current studies fail to recognize and apply all core concepts of intersectionality. Perhaps in part due to the ‘watering-down’ of intersectionality because of its academic institutionalization (Hill Collins & Bilge, 2020). Current hybrid models fail to clearly outline a unified approach that would be useful for emerging qualitative research. Without consistent application of a hybrid model, developing a research base that constructs complex and intricate understandings of health, health promotion issues, and individuals lived experiences through this lens is difficult.

Phenomenological Design

Phenomenology is a qualitative method primarily used to uncover individual’s meaning around a certain phenomenon (Creswell & Creswell, 2018; Flood, 2010; Starks & Brown Trinidad, 2007). Inherent in phenomenology is the philosophical assumption that a perceived reality with common features exists – an assumption that parallels

transformative and constructivism worldviews (Starks & Brown Trinidad, 2007). Flood (2010) suggest the aim of phenomenological research is to understand the subjective perspective of the individual's life experience and how the individual's subjective perspective influences the experience. Starks and Trinidad (2007) confer by suggesting the goal is to discover and describe the meaning of the individual's lived experience around a phenomenon. An emphasis on the subjective perspective of the individual's life experience is well aligned with pragmatism's exploration of human nature. An individual's life experience provides us insight into human nature from the perspective of the participant. Collecting data from many individuals with similar life experience due to commonalities further deepens our understanding of human nature. Thus, phenomenology is well-suited to explore the intersections of weight and race identities for Black Canadians. Given this, phenomenological sampling purposefully selects participants, phenomenological interviewing follows a pattern of participant description and interview probing, and phenomenological analysis seeks to describe the phenomenon, ultimately providing a thematic description of the essence of participant's lived experience.

Reflexivity and The Researcher's Role

The role that the researcher plays in qualitative research is often one characterized by heavy involvement in all aspects of the study; therefore, it is important to reflect on one's involvement (Creswell & Creswell, 2018). Aspects that are often considered important to reflect on are past experiences and how these experiences may shape interpretations (Creswell & Creswell, 2018).

This study explored experience of oppression, specifically on the basis of weight and race. As a person of colour living with obesity, I have experienced oppression across the life span and in all its form and at all levels of society. This had the potential to impact my interpretations of findings through overemphasizing the impact and/or role oppression may play in shaping the lives of individuals. In an effort to negate this, I revisited the data, revisited seminal papers on methods, and engaged in discussions with lived experience. However, as I do not identify as a Black Canadian, I need to be aware and in conversation with Black Canadians around the specific impacts race and weight identities have in the lives of this population's lives.

Prior to beginning this study, my personal involvement with Black Canadian populations was limited to being involved in a community project and transcribing for a study on Black mental health professionals. Given this experience gap I made a conscious effort to seek supervision and guidance from Black leaders in health fields through purposeful selection of committee members. Throughout this study, I have had the privilege to delve into Black health research via work on several research projects that explored and mapped ethical research with Black populations in the Atlantic region and coordinating the On These Shoulders research collaborative – a Black health research collaborative. My involvement with people living with obesity is somewhat limited. Despite limited community involvement, I have worked as a teaching assistant for an interdisciplinary health education mini-course focused on weight-biased reduction for three years, published papers on weight-bias, presented at the Obesity Canada Summit in 2021, and completed my honor's thesis with a focus on weight-bias.

Ethical Considerations

Perhaps the most important component of conducting research with human participants is thorough and deep thought into the ethical considerations of the study. Due to the position of Black Canadians within a White society cultural nuances and ways of knowing and understanding need to be at the forefront of meaningful involvement with the community. With respect to research ethics, the lack of a designated module for research with Black Canadians in the Tri-County Policy Statement 2: CORE-2022 (Course on Research Ethics) is reflective of oppression of Black Canadians within a White society. At the current time, work is needed to develop trust and community level partnerships before competently understanding the ethical considerations specific to Black Canadians. However, typical ethical considerations of human research were considered.

Ethical considerations in qualitative research include, but are not limited to, causing no harm, obtaining informed consent, avoiding coercion, declaration of conflicts of interest, and clear and honest reporting (Connelly, 2014; Munhall, 1988). A primary concern for ethical research is whether it is justifiable to expose the participants to the research (Flick, 2018). Given that this research investigated lived realities that may resurface uncomfortable experiences for participants, it was imperative that mental health and trauma-informed resources were provided to participants as necessary. Flick (2018) emphasizes that ethical research adheres to principle of no harm throughout the process. Pertinent to reducing harm in vulnerable populations is avoiding deficit-discourse – a narrative or investigative focus on deficiency, weakness, or lack of that embeds into normative discourse about that group (Mollard et al., 2020). By focusing on oppression as

a socially constructed phenomenon, deficit-discourse was avoided. As oppression is externally created and enacted upon vulnerable groups, analysis from this perspective recognizes that experiences of the oppressed are not inherent to the population but rather a result of socially constructed power relations.

Preliminary considerations of ethical issues in research pave the way for consideration of ethics in data collection and analysis. Informed consent from participants was obtained via oral assent or through signed consent form that outlined pertinent study information, benefits of the study, and challenges of the study. Further, consent was viewed as an ongoing process that was revisited and reviewed in the event of unexpected changes or consequences (Munhall, 1988). Avoiding coercion was achieved through balancing incentives to participate, as well as, providing participants with the knowledge and autonomy to not participate, or cease participation at any point (Creswell & Creswell, 2018). To maintain patient confidentiality, participant interviews were deidentified and stored on Dalhousie Universities secure SharePoint portal. Ethics approval was provided by Dalhousie University's ethics review board.

Data collection

Setting and participant information

The study took place in Halifax, Nova Scotia. According to the 2021 Census, Nova Scotia is home to approximately 28,000 people who identify as Black (Government of Canada, 2022). This constitutes 3% of the total population of the province. Of the Black population in Nova Scotia, 2.4% identify as ANS, situating ANS as the largest racialized group in the province (Government of Nova Scotia, 2019). Approximately 1 in 8 Black Canadians in Nova Scotia identify as newcomers (Government of Nova Scotia,

2019). It is recognized that ANS have developed distinct traditions and culture, and have a distinct history from other populations of African descent in Nova Scotia (UN Human Rights Council, 2017). African Nova Scotians trace their roots back to the late 17th Century and are the descendants of Black Loyalists, Jamaican Maroons, refugees of the war of 1812, and Caribbean immigrants that inhabited the original 52 ANS communities in the province of Nova Scotia (Black Cultural Centre, 2021).

Initial recruitment efforts were directed toward ANS adults living with overweight or obesity from the historic communities throughout the province. However, recruitment materials did not stipulate historic ANS and may have resulted in those who self-identify within the Government's broad definition of African Nova Scotian (Government of Nova Scotia, 2019) opting to participate in the study. While the study took place in Nova Scotia, it was also open to Black individuals living with overweight or obesity across Canada. Participants were purposefully selected to meet characteristics that align with the phenomenon explored. That is, participants were adult Black Canadians (18+ years old) living with overweight or obesity. Despite common use of BMI to indicate weight status, participants self-identified with respect to their weight. While weight status varies on a continuum, individuals living with self-identified low-weight status were not the focus of this study and were excluded. The participant criteria allowed for purposeful selection of the participants as individuals who are aware of their weight status may be more aware of their experiences with oppression across a variety of settings. The logic was that such awareness allowed rich exploration of the research question. Nine participants were recruited for one-on-one interviews. Ten interviews took place via online meeting platforms (e.g., Zoom or Microsoft Teams). One participant

requested a second interview, explaining the difference in participant numbers and interviews conducted. A semi-structured interview format was used to elicit the participant's lived experiences of weight and race across all levels of their existence (Creswell & Creswell, 2018; Starks & Brown Trinidad, 2007). Aligned with Creswell and Creswell's (2018) recommendations, an interview guide was provided to participants.

Data analysis procedures

Participant interviews were transcribed using the software Otter.ai. I listened back to participant interviews to ensure accuracy of transcription. Braun and Clarke's (2006, 2012) reflexive thematic analysis guided analysis. Thematic analysis is a "method for identifying, analyzing, and reporting patterns (themes) within data (Braun & Clarke, 2006, p. 79)." To provide a clear process of analysis, Braun and Clarke (2006) provide a six-step process for conducting a thematic analysis.

I familiarized myself with the data by transcribing and reading the transcripts twice before beginning coding. Transcripts were imported to NVivo, the qualitative software was used for data management and coding. Initial codes were generated after the second read through. Themes were then generated using a concept map of initial codes. Themes were reviewed for alignment with participant discussion and to ensure sufficient distinction between themes. Themes were finalized and the report was produced (Braun & Clarke, 2006).

Qualitative validity and reliability

The iterative nature of qualitative research ensures ongoing validation of findings throughout the research process; however, defining and outlining these procedures

provides a necessary level of transparency (Creswell & Creswell, 2018). The fourth step of thematic analysis provides an example of how qualitative approaches integrate ongoing validation throughout the inquiry. Techniques to improve qualitative validity include triangulation, member checking, detailed descriptions (Creswell & Creswell, 2018). Qualitative reliability requires consistency within the research approach across different researchers and projects. To improve reliability of this study, I checked transcripts and reviewed codes for drift in the definitions (Gibbs, 2007).

Improving qualitative validity.

Creswell and Creswell (2018) recommend adopting multiple strategies to assess the accuracy of findings and improve qualitative validity within a study. Member checking of transcripts was a technique to increase qualitative validity and trustworthiness. However, less than one half of the participants opted-in to the process – citing a desire not to do additional work. This reflected common critiques of the technique (Candela, 2019).

While terminology varies for validity in qualitative research the core meaning remains stable (Creswell & Creswell, 2018; Noble & Smith, 2015). For example, Noble and Smith (2015) position truth value as a qualitative comparative to validity in quantitative works. Despite this terminology difference Noble and Smith (2015) suggest that truth value “recognizes that multiple realities exist; therefore, researchers’ outline of their personal experiences and viewpoints that may have resulted in methodological bias; clearly and accurately presents participants’ perspectives (p.34).” The pragmatic philosophical foundation and hybridized theoretical framework for this study recognized that multiple realities exist for participant’s and that these multiple realities are not

mutually exclusive but overlap and intersect. Further, clarifying researcher bias was a strategy for improving qualitative validity – a strategy expressed through the reflexivity section. Finally, clear and accurate presentation of patient perspectives was addressed through member-checking of transcripts.

Rich and thick descriptions of findings was made possible through the adoption of two complex theoretical models and reflexive thematic analysis. Intersectionality ensures that individuals multiple, overlapping identities are considered and the SEM ensures that these identities are considered within the varying ecological systems. Creswell and Creswell (2018) suggest that by offering “many perspectives about a theme, the results become more realistic and richer (p.200).” Thus, by offering complex interpretations of findings, coupled with the added layer of participant feedback and review, rich descriptions can be used to convey findings. Providing such deep and complex descriptions can add to the validity of the results (Creswell & Creswell, 2018).

Improving qualitative reliability

Ensuring a consistent approach to the research can be achieved through several means (Gibbs, 2007). Pertinent to this study was revising the transcripts for transcription errors. Transcripts were revised prior to providing participants a copy for revision and after receiving the feedback from participants to ensure accuracy in both grammar and participant’s thoughts. Another method of improving reliability of qualitative research is to ensure there is no drift in the definition of codes (Creswell & Creswell, 2018; Gibbs, 2007). Braun and Clarke’s (2006) process for thematic analysis required iterative revision of codes and themes throughout the research process – a strategy that ensured code

definitions and theme development remain consistent and coherent throughout the process of inquiry.

Chapter summary

Pragmatism allows for exploration of individual's experiences. Through using reflexive thematic analysis through the lens of intersectionality and the SEM, individual's experiences could be explored through a systems and identity lens. Participants were recruited purposefully based on the criteria that they self-identify as a Black Canadian living with overweight or obesity and were over the age of 18. Ten one-on-one interviews with 9 participants were conducted as a part of this study. Using thematic analysis, interviews were transcribed, coded, and themes were developed to represent shared meaning that was interpreted from the participants discussions. Ethics approval was received from Dalhousie University. Efforts to improve qualitative validity and rigor included the use of reflexive thematic analysis, member checking of transcripts, and providing rich and thick descriptions of the data.

Chapter 4: Results

Chapter 4 presents the findings of this project. I developed 3 themes based on participant experiences with race and weight identities in their everyday lives. Table 1 summarizes the themes and subthemes developed through analysis. Throughout this chapter, I will discuss the themes as they relate back to the theoretical framework – a hybridization of SEM and Intersectionality. Situating participant discussions in a hybridized framework allows exploration of nuances through these two lenses.

Table 1

A Summary of Themes and Subthemes

Theme	Subtheme
Multifaceted and complex identities	Identity as a set of characteristics
	Identity as a socially constructed concept
The two things that people remind you of	Bullying
	Unsolicited comments (microaggressions)
Social support and its impacts on sense of self	

Theme 1: Multifaceted and complex identities

Discussions of identity may reflect a subconscious resistance to stereotypical perceptions of those who identify and are perceived as being Black. Discussions of

identity followed two main thought processes among participants. Firstly, participants discussed identity as being a set of characteristics that define who you are (i.e., physical or social characteristics). Participants also discussed identity as a socially constructed concept balanced between a knowing of self and a projection by others of their perceptions onto oneself. These two concepts represent the subthemes: identity as a set of characteristics and identity as socially constructed.

Identity as a set of characteristics

Participants most frequently responded to the identity questions by sharing specific characteristics that made them identifiable. *Who* a participant felt they were was thus a summation of the characteristics they had mentioned.

I think, identity is referred to as a unique set of characteristics that are used to identify a person as them themselves and not somebody else, that one character or that set of characteristics that can be used to identify you as a person, who you are, maybe by your physical attributes, or your religious beliefs, political affiliation. So, I think that can be defined as what I think about identity (Participant 9).

Several participants also identified *major* characteristics. The existence of these main characteristics suggests that participants hold a hierarchical ranking of characteristics within their identities. That is, not all characteristics that compose an identity exist and intersect to impact the everyday life of an individual in the same or equal ways.

Okay, well, for me, first of all, my, you know, my physical appearance, definitely. And that can be in terms of my stature, my height and weight, my color, or the color of my hair. Then maybe in terms of where I'm from my race, and other things can be say my profession, or my religion, sexuality. So, I think those are the main things that I can say are important when someone is identifying themselves (Participant 8).

This participant's discussion of identity follows closely with the most discussed characteristics of one's identity. Specifically, physical or visibly noticeable traits were most frequently discussed. Such traits included race or colour, physical attributes, and body shape, weight and size. Several participants initially spoke of colour rather than race.

P5: Oh, colour.

I: Yeah, absolutely. And so, you say? You said color, you mentioned color. Is that? Do you see your color and your race as connected or do you see them as separate?

P5: For me I think they are connected (Participant 5).

In this quote, participant 5 explicitly tied race to skin colour, whereas participant 8 explicitly tied race to birthplace (i.e., "where I'm from"). While participant 5 does not discredit a relationship between race and origin, nor does participant 8 discredit a relationship between race and skin colour, this subtle difference may point to two things. Firstly, it may note differences in primary understandings of race between participants.

Secondly, it notes that Black Canadian identities specific to the race characteristic are nuanced and complex.

Participants always mentioned more than one characteristic when discussing identity – noting complex and multifaceted identities that ultimately impact their lived experiences.

So, one of the components that make or rather define me is my color of course, my race. I am a Black Canadian. Also, I identify you know, my sexual orientation is straight. I identify as a straight person is what I mean, and also, I identify as a father to one girl (Participant 7).

This participant notes two visible and two invisible characteristics. They link race and colour together here to identify as a Black Canadian, adding weight to the concept of colour as a primary sub-characteristic of race. Parenthood as a characteristic of identity was also mentioned by this participant, the only participant that did so. This adds to the notion that participant identities were complex and multifaceted. Specifically, unconventional or less-discussed identities were of importance to participants.

When discussing race, most participants used the terminology “Black” to identify themselves racially. One participant said, “I see race as part of my identity, because I'm like Black and identify like a Black Canadian. Like, like you, I think you're white. Sorry if I'm wrong, but you also like identify yourself like a white Canadian (Participant 6).”

Not only did participants identify as being Black but they often noted it as a source of pride and empowerment despite challenges they may face because of their race.

Okay, yes, I've had so much experience with race and how I, you know, identify in terms of my color or appearance. And yeah, some of them are positive, others are

negative, um, well, for me, my color, or my race makes me feel unique, you know, in a positive way that is, and it makes me feel unique and privileged, from my side (Participant 5).

One participant noted that identifying as Black provided a sense of pride through the varying cultures and beliefs that constitute Blackness. This lends itself further to *sub-characteristics* of identity that are often captured under race.

And then another thing that's, um, you know, a positive thing is, being in Black race, I think it gives me, we have so many, you know, cultures and so many beliefs as Blacks. So, I think that is something that I love exploring, and I love it that we have so many cultures and beliefs in you know, you know, stuff like that (Participant 8).

Participant 4 noted they loved being ANS despite it being associated with difficult experiences:

I love being African Nova Scotian. In particular, I love being mixed race, it gives its leads to some of the hardest parts of my life. But like, being so multifaceted, like, I've actually experienced white people that are not racist. So, when I'm dealing with racist Nova Scotians, I can just shred them, because I understand without any doubt now as a 31-year-old what racism looks like and Canadians are more mad about being called racist than actually seeing acts of racism in front of them (Participant 4).

Race, or Blackness, was a source of pride and uniqueness for participants, unlike most other characteristics that were discussed.

Contrary to open discussion about race, participants were more reluctant when discussing weight. For example, I had to explicitly ask several participants about their views regarding weight. For example, one participant who had openly discussed race and their perceptions of a racial hierarchy had to be prompted to discuss weight regarding identity.

P10: Yeah, I do see it as a part of who I am? Because like, you can like obviously, like, think of, I like to say like hierarchy, because like, is this like, okay, like, for me, I am a Black person and like to, like a Black person to fit in like a higher rank. It's like, it's almost impossible. So easy.

I: Yeah, so you're saying it's

P10: like, I can't, I can't like rank myself at the top, but at least I will be able to like to like take care of my [bills]. Yeah.

I: Okay, yeah. So in a rank, you find that because of your race, you move down, say under White people?

P10: Yeah.

I: Okay, absolutely. Thank you for sharing that. And do you find? Do you see your weight as a part of your identity?

P10: I do see it as a part of my identity (Participant 10).

After breaking through initial hesitations to discuss weight, participants would often use indirect language for weight such as stature or size, or when discussing weight, combine it with discussions on height.

My interest was because I identify with the group you're looking to interview, African Nova Scotians. Me, myself, I'm like, six feet, probably 270lbs at the moment, and I have pretty much been that size. I have been fluctuating between 220 and 270 since I was like, 14, till now. So like, I pretty much been the same size since, like, being an early teenage (Participant 1).

While no participant explicitly stated they did not want to talk about weight, use of synonyms may indicate discomfort in discussing the topic when compared to the openness of discussion on race. This may indicate weight as a more stigmatized topic among Black Canadians. Furthermore, weight may arise as a source of shame for participants as many discussed it as a negative construct and referenced desires to lose it.

Even for those who expressed self-compassion and a positive sense of self, the idea of losing weight permeated their discussions.

Of course, I do have you know, my self esteem is, I'm good in terms of you know, sometimes when you are obese, some people lose their, they don't love themselves or they don't appreciate themselves but I think I'm different. I do feel proud of myself only that I know that I need to do something and maybe to cut the weight and everything but I love who I am. Yeah (Participant 7).

Despite race and weight or physical attributes being the most discussed characteristics, participants discussed a lot of invisible characteristics that summed to create their identity. These included religious beliefs, sexual orientation, culture, career, political affiliation, and upbringing. Participants often simply listed these invisible characteristics and did not expand on how they played a role in constructing their

identity. Sexual orientation was the most frequently mentioned invisible characteristic of identity; most individuals identified as straight, while one participant identified as demisexual. For this participant being demisexual meant “if I don't have an intellectual, like, relationship with the person, if I can't speak to them on an intellectual level, there's zero attraction to me (Participant 4).”

Identity as a socially constructed concept

Identity was not only discussed as a set of characteristics but also as abstract conceptualizations of self. Participants differentiated between two main abstractions a) how they perceive and portray themselves and b) how others perceive them. In this sense, identity could develop internally, or it could be projected onto oneself by others.

I mean, there's, I think there's two facets of identity. There's how you experience yourself, and how other people experience you, right? So that can come into like, so for example, last June, I got up to 290 pounds after an injury. And I've been, I've fluctuated weight my whole life. And it was bad, I couldn't fit into my bathtub anymore. And I couldn't fit into bus seats anymore. And for me, as someone that likes athleticism. If I could function at the sports that I wanted to do at that weight, I'd be okay with that. But I was starting to run into like, difficulties going through my life. And so I would tell people, I'm like, Oh, I got to get control, because a part of my issue is I do have a binge eating problem that I have to be very careful of with food. And I'd be like, Yeah, I'm overweight now. And it's like, technically, I'm morbidly obese now. And I like I should probably do something. I have a history of diabetes in my family. Like, this is too big for me. And they would always be like, “Oh, no, no, no, you're not fat, you're beautiful.”

I'd be like, those are two separate things. Like me being fat doesn't change my beauty. Why would you say that? And that was the most common response I got from people was "Don't say you're fat, you're beautiful." And I'm like, I can be fat and beautiful at the same time. (Participant 4)

This participant's abstraction of identity as "how you experience yourself" implies that identity hinges on an interaction between a summation of characteristics and external forces. In this example the self is the overweight/obese body, and the experiences are interactions of the self and functional activities (e.g., fitting in chairs, fitting in bathtub). In this abstraction, little room is permitted for perception of oneself, a factor that may mediate how one experiences oneself. However, this understanding aligns well with Bronfenbrenner's ecological model that situates the individual as being acted upon by the varying systems either directly or indirectly. Thus, the self may be conceptualized as a passive identity.

Conversely, intersectionality positions oneself as an agent of action. Emphasis on social justice as a component of intersectionality suggests agency of individuals to act against external forces to enact change. With regard to identity then, intersectionality implies an emphasis on how people see and perceive themselves. Where a passive individual is impacted by external forces, here the individual is active in that perceptions of self influence how the individual experiences the external forces. One participant noted a performative element to identity in that it is a projection of who you feel you are rather than experiencing yourself.

I think, identity to me is not what people see you as, it's what you see, you are, like, it's not, I don't want to say what but you know, what I mean, it's who, what, maybe

even, you portray, or what you put out there, but it's also who you feel you are, you know, so, like, we have terms of what is it called, um, looks like every all my memory has gone today (Participant 3).

This abstraction of identity aligns with the agency afforded to individuals through the components that constitute intersectionality. Indicating that identity is “what you see yourself as” provides agency through recognizing internal perceptions of the characteristics that construct the self. These internal perceptions drive an individual’s experiences rather than external forces.

Two participants also touched on the second abstraction of identity – how others perceive you. Similar to internal identity, ‘from the outside looking in’ was presented in terms of “experiencing” versus “seeing”. For others to experience you, and, through doing so, shape an individual’s identity, self and the other must interact in some form to create that experience. However, it may be argued that others cannot experience *you* but rather must experience themselves perceiving *you*. Therein lies a potential fault in the abstraction of identity as an experience. This may be a sticking point for hybridization of Bronfenbrenner’s SEM and intersectionality.

Participant discussions of identity portrayed nuanced and multifaceted perceptions of identity. Not only were participants’ identities composed of varying characteristics – as with race – but characteristics may also be further nuanced, creating *sub-characteristics* of identity. These *sub-characteristics* represent varying understandings of what constitutes a characteristic and may ultimately change how that characteristic intersects with other characteristics to impact the everyday experiences of the individual. Furthermore, participants discussed identity as a concept in differing ways. These

discussions point to the summation of the characteristics of identity being a product of how oneself or others experience or perceive oneself. Ultimately abstractions of identity have implications for the applicability of a hybridized SEM and intersectionality model in research.

Theme 2: The two things that people remind you of

Inevitably, constructed identities, whether understood from an experience or perception standpoint, must interact with the settings outside of the individual. Participants often indirectly commented and discussed how their identities existed within and across the systems of Bronfenbrenner's model to ultimately impact their everyday lives. Specifically, interpersonal interactions situated in the microsystem were a common thread for race and weight that were situated at the forefront of individuals' lived experience.

Well, my weight and my color has really had a lot of impact in my life. Because those are the two things that have really been standing out in my life. Because from back schooling, to workplace, those are the things that people always remind me, you Black, you overweight, because once you troll me, because of the two, you keep on reminding me that I do not fit in (Participant 9).

The notion of being constantly reminded of race and weight lends itself to the suggestion of a hierarchy of characteristics that sum to form an individual's identity. That is, race and weight as identities, play a larger role in the everyday lives of Black Canadians living with overweight or obesity. A counter argument may be the focus in the intersectional literature on race, class, and gender identities indicating that weight may

not be situated as a core characteristic in said hierarchy. Nonetheless, a hierarchy of characteristics is not a focus of this study.

The two sub-themes of “bullying” and “unsolicited comments” share similar origins in that they are both forms of harassment. However, discussions highlighted bullying as limited to school settings. Bullying may then be distinguished as a patterned behaviour associated with being immersed in the school setting. Conversely, unsolicited comments arose in settings outside of the school and were discussed as one-off experiences. Regardless, both exist as forms of oppression that seek to *other* and disempower individuals.

Bullying

“Bullying” was a pervasive topic of discussion across race, weight, and the intersection of the two.

At school, like every Black child, you must go through some sort of racism, like mostly more than half a percentage of the Black kids go through bullying at school. But I have for me, yes, I have gone through it once for being Black, the other one for being fat. (Participant 6).

This participant notes not only the pervasiveness of racism through bullying at school but also suggests racism as an oppressive *rite of passage* for Black children. The use of “must” suggests that Black children are required to go through this if they are to make it further in life. Ultimately, all children must go through school; however, the addition of racism through bullying for Black children creates an evidently more difficult path.

Well, for me when I got to Canada, it was one thing that I really didn't expect. You know, I've been to a place back in South Africa, where no one recognized me because we are of the similar colour. So once I got to Canada now I faced a lot of discrimination because one I go to a school well, where most of the people were white, so the moment I started, like people would make fun of me, one I'm from an African country, two I'm Black. So that has really got me to a lot of trouble at a time. Because even when I was chatting, I realized that most of the students didn't want to engage with me, because they will discriminate me because of my color, because of my race (Participant 9).

Given this participant's experiences in a different context, it may be deduced that hegemonic whiteness perpetuates othering through bullying at school. Here a macrosystem ideology (white supremacy and normalcy) manifests in a microsystem setting (school) to strip Black children of a positive sense of self and other them through social isolation.

It was not only other students that were noted as perpetrating bullying against Black children. Teachers were noted as active participants in othering students.

But because I was on an IPP, it wasn't for learning, it was for, I don't know, for my anger because I had temperamental issues when I was a kid. And like, I would just Black out from the teacher picking at me, I always felt like teachers picked at me just because I was always that bigger kid (Participant 1).

Individual program plans (IPPS) are known to disproportionately impact African Nova Scotians and their learning opportunities (Nova Scotia Department of Education and

Early Childhood Development, 2016a). Despite IPPs aim of “inclusive schooling” and to “facilitate membership, participation, and learning of all students” (Nova Scotia Department of Education and Early Childhood Development, 2016b), experiencing bullying from teachers undoubtedly has an opposite impact on students. In fact, discussions with this participant indicate that the teacher’s bullying triggered “temperamental issues”, leading to a response from the school setting to place this student on IPPs. It may be drawn then that hegemonic whiteness, as a macrosystem ideology, permeates through the exo-, meso-, and microsystems to influence how teachers perceive and interact with Black students. Through the abstraction of identity as *how others perceive you* this impacts the everyday lives of Black students.

Macrosystem ideologies of weight also promote and sustain categories of normalcy and supremacy that permeate varying systems of the ecological model to impact the everyday lives of individuals. As such, participants discussed bullying as a form of weight discrimination that damaged their identities.

But initially, this has never been a problem to me, because I grew up seeing people in my family being overweight. But I didn't know that one day, this would become a challenge for me. Because I got to Canada, and I realized, like, people are recognizing me being overweight. Because, for example, when I go to school here, the first thing and the fact the very first comment I got, I was trolled because of my weight. And one of my classmates was like, ‘you so big, you look like a hippo’. One, I was so devastated because that is something that I had never experienced in my life. I think back in Africa, I think people don't do not, like, really considered

that so much. So once you big that is you and no one really cares, now (Participant 9).

Once again, this participant mentions their move to Canada as the beginning of their experiences with bullying – this time, with respect to weight. This discussion indicates a hegemonic macrosystem ideology embedded in Canadian values, culture, and collective identity that, seemingly, did not exist for this participant in the country they moved from. Furthermore, comparisons of this participant to African fauna suggests deliberate racial undertones associated with weight-focused bullying.

While weight and race intersections were the focus of this project, one participant's discussion noted weight and gender intersections. Participant 1 reflected on being teased for their weight because they had "man-boobs". Here, a feminine-associated physical trait on a masculine body became the target for weight-based bullying. Implicit in this line of harassment is a devaluing of femininity, reflecting known macrosystem gender ideologies. Both examples, indicate weight-based bullying is often coupled with other identities, likely in an effort to increase effectiveness.

Some participants discussed the impacts of bullying on their everyday lives. Bullying, whether based on weight or race, prompted avoidance behaviour by one participant as the school setting became a place of trauma.

And I remember even trying to like, stop going to go into school, in the certain thinking, how can I even change the school? How can I get to a new environment, because I felt that people are not appreciating me here. Every time I'm with my

friends, there are people who are making fun of me. And it has not been a good experience at all (Participant 9).

Another participant noted “staying in class (Participant 7)” rather than engaging in play to avoid the bullying. Furthermore, the connection was made between bullying and IPPs, with participants indicating that bullying was “one of the major factors contributing to poor school performance (Participant 9).”

Participant’s discussions of bullying at the intersection of race were brief. One participant had noted they are bullied “once for being Black, the other for being fat.”

So, I think that has been part of my.... it shaped my lifestyle. And I think, too, it was one of the reasons I would grow, you know, bigger. You're eating a lot. You don't you don't play a lot. Eating again a lot. You You're staying, you're staying indoors, you know, with your Playstation and everything. So yeah. I would attribute my my racial identity to to shaping who I am today (Participant 7).

This participant drew a casual link between their weight status and racial discrimination faced in the school setting. The link may suggest that discrimination leads to obesity through nutritional changes (e.g., “eating a lot”) and avoiding school to stay indoors (e.g., playing PlayStation), thus highlighting the importance of addressing school-based bullying and racism. Undoubtedly, experiences of bullying in schools have detrimental impacts on student performance, health, and everyday life.

Unsolicited comments

Interpersonal interactions that negatively impacted participants’ everyday lives occurred across varying settings outside of school; however, these were often discussed

as stand-alone interactions rather than persistent, recurring experiences as seen with bullying. It is important to note that these unsolicited comments were experienced more than once by participants, but the perpetrator changed between experiences. Conversely, bullying was perpetrated repeatedly by classmates in the school setting. Unsolicited comments are a specific form of microaggression. Microaggressions are defined as “brief and commonplace daily verbal, behavioural, or environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory, or negative racial slights and insults toward people of colour (Sue et al., 2007, p. 271).” Participants experienced unsolicited comments in the workplace, at the gym, in healthcare facilities, etc. Often, participants were unable to remove themselves from situations where these comments were made due to potential consequences and power relations.

My last employer literally came up to me he's like, but do Black lives really matter, though? Like, why do we have this and I was like, homie, I'm going to dog daycare right now. Like I don't need this conversation. Another one would be like, Yeah, you know what? Some racial stereotypes are true. You're trying to groom a dog right now, [name], why do I need to have this? Like, why are you trying to put me in this conversation right now? (Participant 4)

The power dynamic between employer and employee can act as a *trap*, and removing themselves from such a situation may lead to repercussion with employment. The participant noted that the racism in the industry (dog training) they worked in was “insane” and they didn’t know of any Black business owners in the industry, further adding to their inability to challenge or stand up against racism in their workplace.

One participant noted a culture shock when moving to Canada due to the “criticisms” they received because of their “colour”. Another participant discussed their experiences in healthcare:

Like, I'm this very different and weird of person, you know, they just behave like we have very different needs as Blacks from the rest of the people, like, I think, I don't know, we need some special kind of care. Or, you know, treatment, maybe some treatment does not work on us. I just find that, then again, when they're just asking questions sometimes. That they just get so personal. They just, I don't know, they find Blacks sometimes so unique and very different. And sometimes, its intimidating (Participant 8).

The othering of Black folks here manifests as healthcare providers' perceptions of the needs of Black patients. The idea that Black patients have “very different needs” inevitably stems from a lack of understanding. Given that race does not stipulate genetic differences, the biological mechanisms of disease are not different for Black folks, thus the understanding of “different needs” likely is a manifestation of discomfort due to a lack of culturally competent and safe training practitioners receive in their education programs or a manifestation of outright racism. Further, the participant notes “personal” lines of questioning that create an “intimidating” experience for Black folks. This line of questioning may once again be a manifestation the macrosystem ideology of white normalcy expressed as a misguided *curiosity* of the provider.

Verbal and nonverbal *comments* dominated discussions of weight. Participants' discussions implied a constant surveillance of larger bodies. Whether in transit or trying

to enjoy a meal, participants felt as if “all eyes” were on them. Judgement from others not only manifested as staring but comments across various settings.

It's usually the first thing someone says when like, for example, say, I have a job interview, and I'm talking to the person, and then I come and see them for the interview...their first impression of me...if they're not a larger person their selves, they're always like “wow, you're a big guy!” (Participant 1)

While not an inherently negative experience, this comment represents the freedom that many people feel they have to comment on the bodies of others. In a professional setting, not dissimilar to above, a power dynamic creates a *trap*, particularly when an individual is interviewing for a job.

One participant noted a sense of shame that developed through interpersonal interactions because of people’s perceptions of their weight identity “*Even just the way you know people express themselves to you, or they talk to you, sometimes it just feels like they are, you know, shaming you (participant 5).*” This sense of shame is well-established in weight-bias research (Kirk et al., 2014) and has detrimental impacts on the everyday lives of those who experience it.

Healthcare settings were noted as pervasive perpetrators of unsolicited weight-related comments that impacted the everyday lives of participants. Weight was often not the focus of healthcare visits for participants, but practitioners felt a freedom to “lecture” the patient about their weight.

Okay, um I've also had some experience with weight and sometimes some time back I went for a therapy session actually had a very different issue that is

completely not related to my weight. And so, I, I got there, you know, but by the time the session is ending the therapist was like, I don't know, is there something that maybe you can do about your weight? So, you get frustrated and so angry, you know, how do you just bring up you know, an issue about my weight all of a sudden, and I have noticed it myself. It's not something that is bothering me. I, even though, yeah, I can get a feel that I have a big body, but that does not bother me in any way or another. But why is it that that has just become a subject of discussion. And so I think I honestly felt so angry and mad (participant 8).

Participants noted several instances of foregrounding weight as the root of all health issues. One participant reflected on visiting the doctor for a “rash” and coming out without any solutions for the rash but the doctor telling them they were “morbidly obese.”

And I was, I was mad. So, you mean to tell me I have a rash that's not a rash, because I'm overweight, or morbidly obese. But yet you check off my blood levels, which, when I came back to him, and they were fine, everything was baseline, no high cholesterol, no high sugar (Participant 3).

For participants, this centring of weight gave rise to feelings of anger and frustration. In every case, participant's original concerns did not relate to their weight; however, practitioners felt a freedom or, perhaps a professional obligation, to comment on the weight of participants. In either scenario, healthcare practitioners and healthcare settings act as delivery mechanisms of macrosystem ideologies regarding weight that seek to devalue or other certain individuals and promote normalcy through acceptable and non-acceptable weights. Defaulting to weight as the root of health issues dismisses other

health related concerns and perceives these individuals solely as a product of being “fat”. Further, it promotes a narrative that the individual does not have proper knowledge of their own body and that healthcare professionals have a *truer* understanding of this individual. This, in turn, acts to devalue individual concerns, opinions, and feelings about their own bodies and attempts to push them to conform with normalcy, however that is defined.

The pervasiveness of unsolicited comments and pressures to conform to certain standards seemingly crept from the outside to internal perceptions of self as participants mentioned comparing themselves to others.

But maybe going shopping at the mall, maybe Walmart, I get, you know, sometimes I do feel like, like, I'm a failure, you know, there you can see, you can when maybe when you're shopping, you can maybe admire someone's body. And some people really have good physique. And once you look at yours, you feel wow, I think I'm living our worst life. You know, I'm not really taking care of my life (Participant 6).

Participants also discussed the impacts of the othering process experienced by people living with obesity. Exposure to hegemonic ideologies through interactions in varying settings (e.g., healthcare, work, etc.) create internal expectations of what is a “good” body, and consequently, what is a “bad” body. Participants discussed comparing their “bad” bodies to those who are perceived to have a “good” body, this comparison of bad and good was inevitably tied to worth and value of the self. In turn, participants noted “lower self-esteem” as an impact of internalized weight bias.

Unsolicited comments at the intersection of race and weight were commonly premised on stereotypes of *who* constitutes collective Black identity. Once again, interpersonal interactions were the mechanism that delivered hegemonic ideologies to Black individuals living with obesity.

So I, I tried exercise and working out and for me, I felt like you know, the fastest way to lose weight was going to the gym, you know? ... So I found a lady she was white and so you know, we just like started having conversation and like, just out of nowhere she just started asking how come you have like all this weight and body and you're Black yet there are no other people, most of the people that I know that are Black have like, you know, perfect bodies or lean bodies. And it just kept me thinking like, why, why should she relate my weight to my race? Does it mean that we don't have like Black people that have big bodies? Or maybe I don't know what... know what was happening or what was wrong with me being having a big body and being Black at the same time (Participant 8).

Normalcy permeates hegemonic ideologies of race here, to compound the process of *othering* experienced by this participant. Firstly, the experience reflects Blackness as a monolith through the insinuation that there is one kind of Black body. This pushes the participant to the margins of Black identities. Secondly, the freedom to comment on an individual's body size reflects an additive experience of othering, further marginalizing this participant. Compounding dominant macrosystem ideologies position Black Canadians living with overweight or obesity as nonconforming and therefore a subject of multi-front oppression.

Theme 3: Social support and its impacts on sense of self

Theme 3 recognizes participants admission that the compounding impacts of interactions based on race, weight, and their intersections creates a difficult journey for participants, but that certain supports play a vital role in helping them along a path to self-compassion. The impact of life-long lived experiences of race and weight identities extends across various settings and contexts that these individuals found themselves in. While all participants noted negative impacts across the identities and at their intersections, some expressed through their journey that they have learned to “love” themselves.

Well for the negative, I think, there's so much that comes with a difference in color and appearance. And especially when you are in an environment where people or, the majority of the population is made up of, you know, a very different identity of people, or a very different race. Sometimes we tend to feel like you don't belong, that is something I've experienced, just feel like you don't belong, you, you're not supposed to be here. And again, the people around you sometimes make you feel the same, that you don't qualify being around, you know, and you're not supposed to be here, and maybe this is not the environment, or sometimes, yeah, there's so many privileges that your, the rest of the people are getting, but just because you're different from the rest, and it becomes difficult for the services to be offered to you or this privileges to be, you know, offered to you, so it just becomes an issue (Participant 5).

Participants' journeys through life in Canada were marred with obstacles that negatively impacted their everyday lives. The privileges afforded to those whose identities

conformed were not to be relied on to aid the journeys of Black Canadians living with overweight or obesity. White normalcy is noted as playing a role in diminishing a sense of belonging for this participant. Impaired and lowered sense of belonging are consequences of the *othering* process. In the microsystem, these mechanisms manifested as bullying and microaggressions within interpersonal interactions.

From the weight perspective, participants noted others made them feel “unworthy” along their journey but never attempted to know “the story” behind an individual’s body. Participant 9 noted “with life, things just happen.” Consequently, an individual might find themselves “eating [too] much” to cope with everyday stressors, or “maybe someone has an underlying condition.” This participant discussed the different journeys everyone has and questions why one would “judge” anyone based on their characteristics when they do not know the story.

Systems forces, particularly interpersonal interactions within the microsystem, have been discussed as impacting the everyday lives of participants in various ways. Overwhelmingly, participants discussed the negative impacts of these systems forces. Despite this, participants continued their journeys due to the social support they had received from loved ones. Specifically, participants noted family and peers as a stronghold of support that enabled them to carry along their personal journeys.

With specific reference to bullying in the school setting, participants often noted race commonalities as a base for creating support circles. A sense of belonging and connection through a shared race identity may be one mechanism of beginning to address bullying for the targets.

Yeah, most of I think my best friends, both at home or even in school are Blacks. At least I could identify with them terms of the race terms of Colour. I think with them, I feel like I can relate to them. Can I identify with them? You know, the only difference of course, is the weight. So yeah, I had friends who were coming through for me (Participant 7).

Participant 8 noted a similar race-based connection with “fellow Black people.” There was a multiplicity of Blackness noted by participants. Firstly, being perceived as or identifying as Black within the macrosystem ideology of white normalcy led to unfavourable interpersonal interactions. However, situated in a collective identity of being Black provided participants with a social support network that could resist hegemony and provide a *safe* space for Black Canadians living with overweight or obesity.

In terms of positive, I think the Black community support each other more compared to the white. So, I think being part of Black has really, being part of the Black community has really built me in terms of giving me courage. And yeah, basically that courage, we're there for each other. We really help each other. Yeah (Participant 6).

This participant suggests the community contributed to developing the identity of its members in a positive manner. The “courage” given to this participant by the community may be the product of positive social support and a shared sense of belonging. The connectedness was discussed through COVID-19 initiatives to support those who were most impacted in the community and included “raising funds”, “showing them love”, “visiting”, and “community check-ins”.

Most participants discussed the impact of peer and family support when it came to resisting weight normalcy on their journey to self-compassion. Participants discussed how friends “near my weight” played a positive role in resisting the experiences that negatively impacted their everyday lives (Participant 10). This once again indicates how a shared collective identity aided in creating a sense of belonging that enabled participants to resist macrosystem ideologies of normalcy. Despite peers assisting to provide support through collective identity, some participants noted that they could only rely on their parents or family. Above all, unconditional support and love came from participant’s immediate family, noting a positive microsystem influence on the everyday lives of Black Canadians living with overweight or obesity.

Explanations as to how and why peer and family support played an important role in the lives of participants was infrequent. However, one participant (participant 7) provided examples of things his parents did to support him, including “buying pills” and finding someone who can provide “guidance and counselling”. Key to positive support was not “shaming” or “judging” the individual for who they were (Participant 5). Another participant discussed how family can “encourage you” to manage weight and alleviate potential health risks but still be in “full support” of the individual and their journey.

While social support most often arose from peers and family, participants also shared *unconventional* feelings of social inclusion. For example, one participant (participant 5) noted being at sporting events where the fans “don’t make jokes about you” and are “really supportive”. Another (participant 10) noted their experience in the gym was “wasn’t that good and it wasn’t that bad” and they had “dudes” who were “motivating” him. The instances of positivity here are a product of a shared sense of

belonging (e.g., to a football club fanbase or to a gym), adding to the idea of *belonging* as a protective factor against hegemonic normalcy.

Throughout their interviews, participants portrayed a strong sense of self and determination by talking through their ability to find self-compassion and resilience on their journeys.

But I think for now, I'm blending in, I'm trying to blend in. So, I think I've developed some resilience in that, I think for now, I'm trying to be comfortable as much as there are negative comments about it. The negative treatment, I think I can withstand through the help of proper health care providers, my counselor, and my psychologists. Yeah (Participant 9).

An inevitability or an expectation that the negative interpersonal interactions would always be a part of their everyday lives permeated some discussions. This sense of inevitability exists because they will be “forever Black”; however, a hope exists that they may, in the future, “control” their weight. Resulting from this inevitability, one participant (9) learned to “stand firm” and “appreciate” themselves “along the way.” Interestingly, this participant, unlike others, mentioned the role of healthcare providers have in assisting participants to maintain their resilience despite the negative interactions. Another participant recognized that the kind of self-esteem they had developed does not “grow overnight” but was a product of surviving through the struggles that arose from the intersecting expectations of normalcy.

A sense of self and belonging could be maintained by participants through developing self-esteem and finding self-compassion. Undoubtedly, social support plays

an important role in guiding participants through the struggles they may face.

Unconditional love and support were only noted from immediate family but peers and settings where participants found a shared sense of identity (i.e., as a fan of a football club) provided positive experiences that assisted in maintaining a sense of worth and countering the *othering* process that arises from nonconformity to hegemonic normalcy.

Summary of findings

Three themes were developed through reflexive thematic analysis of participant interviews. Participant discussions highlighted the multifaceted and complex identities that represent *who* they are. Identity was viewed as both a *set of characteristics* and a *socially constructed concept* by participants. Characteristics that constituted participants' identities were visible (e.g., race, colour, body shape, weight) or invisible (e.g., political affiliation, career, parenthood) and could either be perceived by participants as part of who they are or ascribed to them by others' perceptions of who they are. Weight and race were explored through the lens of *the two things people remind you of*. *Bullying* and *unsolicited comments* that participants had experienced throughout their lives emerged as dominant subthemes here. There was a recognition of the burden of identifying as a Black Canadian living with overweight or obesity; however, participants noted *social support*, particularly from family and peers, as crucial to developing a positive sense of self and restoring their self-esteem.

Chapter Five: Discussion

The purpose of this study was to explore the intersection of race and weight, as identities, in the everyday lives of Black Canadians. Specifically, this study focused on how the overlapping identities resulted in supports and/or challenges for adult Black Canadians (over 18 years) at their intersections. These intersections were elucidated through responses to the following research questions:

1. How does weight impact the everyday lives of adult Black Canadians?
2. How does race impact the everyday lives of adult Black Canadians?
3. How do weight and race intersect to impact the everyday lives of Black Canadians?

Using a hybridized theoretical model situated in the SEM and intersectionality, the analysis of 10 participant interviews unpacked participant discussion that aligned with the overall purpose and objectives of this study. Three themes were interpreted and presented in the findings/results chapter: *identity as multifaceted and complex*, *the two things people remind you of*, and *social support and its impacts on sense of self*. This chapter will summarize the findings and discuss the theoretical importance and foundations of the themes as they relate to the hybrid model derived from the SEM and intersectionality. Implications of the research are then discussed, followed by recommendations for future research and overall conclusions.

Identity

The collective participant discussions indicate that Black Canadians conceptualize their identity as the sum of a set of characteristics that are determined both from within the individual and through external forces. Identity was discussed as complex and

multifaceted, consisting of visible and invisible characteristics, and giving rise to discussions of *sub-characteristics*. The idea of *sub-characteristics* may imply a layered and nuanced conceptualization of identity for Black Canadians. The totality of identity discussions indicated a resistance to macrosystem ideologies that permeate Canadian society (e.g., devaluing of non-White Canadians through essentializing).

Participants' discussions of identity contradict hegemonic perceptions of homogeneity of the Black population in Canada. Mensah (2005, p. 72) notes the dominance of portrayals of Black Canadians as a homogenous group. That is, Blackness is often portrayed through media and academic discourse as a monolith. However, Black Canadians represent diverse ethnicities, immigration status, generations, places of origin, etc. (Mensah, 2014). Literature acknowledges Black Canadians as ethno-racially diverse; however, participants indicated their identities permeated into other social realms of society (i.e., careers, political affiliations, body size, parenthood). Rhetoric defining and deconstructing Black identities (that is, *Who is Black?*) plays a crucial role in strengthening the quality of Black health data and addressing health inequalities faced by Black Canadians (Cénat, 2022); however, a singular focus on the heterogeneity of *Blackness* potentially paradoxically reinforces homogenous conceptions of Black Canadians. That is, focusing on only the differences of *Blackness* (e.g., ethnicity, country of origin, religion) may result in failure to recognize gender, sexual orientation, career, political affiliation, and other variations among Black Canadians. Intersectionality allows a recognition that Black Canadians experience not only Blackness but life at the intersection of gender, class, weight, etc. Positioning intersectionality at the forefront of

Black health research may help counter homogenous portrayals of Black populations in Canada.

The tendency for participants to discuss race alongside “colour” or “origin” may indicate *sub-characteristics* of identity and in turn, unequal impact of characteristics on the everyday lives of individuals. Abdelal et al., (2009) note that identifying with the term Black Canadian is more likely among people who share similarities in race, ethnicity, religion, etc. This may indicate that rather than race being situated as a “major” characteristic of identity, it is subsumed into Blackness. Participants’ discussions of diverse cultures, languages and traditions within Blackness may support the notion of *sub-characteristics* of identity. Conversely, it may reflect a *layperson’s* understandings of identity through experience, in that participants frequently identified as Black when discussing race and discussed race as a driver of the interpersonal interactions that influenced their everyday lived experiences. This may then reflect participant understandings of identity in contradiction to the nuanced and deconstructed discussions of identity within academia (Anthias, 2008; Berman, 2016). Regardless, *sub-characteristics* of identity are worth exploring in future research to understand how Black Canadians experience their multifaceted and complex identities. Doing so may assist in targeting interventions and services at the *major* intersections of individuals everyday lives.

Weight identities are recognized as highly stigmatized and subject to devaluing in society (Puhl & Heuer, 2009). Hegemonic discourse of weight status in Canada blames the individual (Kirk et al., 2014), and links weight to morality (Ristovski-Slijepcevic et al., 2010). Participant discourses portrayed stigma through hesitancy to discuss weight,

use of synonyms (e.g., size) and references to an ultimate desire to lose weight. While race identities were often discussed as a sense of pride, weight identities were framed within a desire to change. Smith (2019) and Ristovski-Slijepcevic et al., (2010) discussed how Black women in North America were found to be accepting of diverse body images and resistant to Western standards of body image but did not discuss what may be different experiences of Black women elsewhere in the world. Resistance to Western body images standards and acceptance of diverse bodies was not noted by participants in the current study. This may reflect discussions of weight identity regarding everyday experiences as the focus of the current study, rather than conceptualizations of the body as noted by Ristovski-Slijepcevic et al. (2010). While this finding seemingly contradicts previous literature, it may indicate that a focus on the intersection of weight and race identities in everyday life reflects the complexity of weight identities for Black Canadians. It may also illustrate how Black bodies may be a product of macrosystem forces – adding to the literature on how these forces might be perpetuated or resisted.

Participants' constructions of identity as a social concept premised *who* an individual was on perceptions from within oneself and projections by other's of their perceptions onto the individual. Typical definitions of identity recognize it as the adopted goals, roles, and values that provide purpose to one's life (Berman, 2016; Berman et al., 2020). Participant discussions diverged from conceptualizations of identity in two ways. Firstly, they considered how others perceive them as integral in the determination of identity. Further, participants did not extend considerations of identity into values (e.g., morality, respectfulness, empathy). Conversely, Anthias (2008), through the lens of translocational positionality, shifts identity away from categorization toward a focus on

social locations and processes. External perceptions of oneself that shape identity may be noted as products of social processes and as situational depending on the totality of one's social location; however, discussions by participants didn't entirely reject identity as defined by Berman (2016). The points of divergence between typical and alternative academic discussions of identity from the perspective of participants point to ethno-racial differences in understandings of identity for Black Canadians that warrant further exploration.

Interpersonal Interactions

Interpersonal interactions act as the frontline to ensure those that are othered through race and weight identities are constantly reminded of *who* they are perceived to be. Frequently, these interactions manifested through bullying and unsolicited, unexpected comments from strangers. Bullying is an omnipresent threat to the development of Black children in Nova Scotia as it is perpetrated not only by students, but also teachers, and through the microsystem as IPPs (Baker et al., 2001; Nova Scotia Department of Education and Early Childhood Development, 2016a). Microaggressions, in the form of unsolicited comments permeate all aspects of individual's everyday lives (e.g., the workplace, gym, healthcare, etc.). Both bullying and microaggressions are microsystem manifestations of larger macrosystem ideologies that promote standards of supremacy and normalcy. Those who are exposed to these manifestations internalize the standards over time resulting in a devaluing of self.

Bullying. Bullying was frequently reported as experienced by participants in the school setting, impacting their sense of belonging and self. Participants noted having to “go through” bullying twice, once for their race, and once for their weight. Puhl et al.,

(2016) found that weight-based and race-based bullying were the 1st and 4th most reported forms of bullying in Canada. This finding aligns with participant's intersecting identities resulting in multi-form bullying experiences. Furthermore, school has been recognized as a "key arena (p.94)" for racism giving rise to two common experiences, name-calling and threats of violence (Baker et al., 2001). Existence in a consistently racist environment (versus highly publicized instances of racial violence) is noted by Baker (2001) as the primary concern for racialized (Black and Indigenous) adolescents and their parents. Bullying lies within a consistently racist environment, and participant experiences identified in this study add to the literature that school-based racism is a primary concern for Black Canadians (Baker et al., 2001).

Teacher-to-student relationships were another avenue that participants identified as giving rise to bullying. This form of bullying may reflect a school climate of acceptance of bullying. School climate is defined as the factors that impact the relationship between actors at school (Emmons et al., 1996) and may represent a setting (microsystem) influence beyond interpersonal interactions that enables bullying. Further, there is strong public support for policy interventions at the school level to reduce weight-based bullying (Puhl et al., 2016). This represents a collective perspective of society on the importance of the school setting in addressing bullying. However, Larochette et al., (2010) found that individual-level factors were better predictors of bullying and victimization in Canadian students. This indicates interventions targeted at diminishing the biases of school-setting actors may assist in reducing experiences of bullying faced by students rather than targeting settings-level factors such as school climate.

Whether student-to-student or teacher-to-student, and whether based on race or weight, participants reported a desire to disengage from the school setting as a response to experiencing bullying. Baker (2001) suggests a three-phased response to experiences of racism by adolescents, *splintered universe to spiralling resistance, to disengagement*. A *splintered universe* occurs at the first experience of racism and the individual's reaction is generally one of shock. *Spiralling resistance* denotes a pattern of "attacking first those who attacked them (p.98)". Finally, *disengagement* involves a loss of hope and connection with society (Baker et al., 2001). This notion reflects a complex response process to experiences of racism (including bullying at schools) that may better understand participant's reactions. While participants noted emotions reflective of a *splintered universe*, they did not mention retaliation reflective of *spiralling resistance*, instead jumping to discussion of desires to leave the school and feelings of hopelessness reflected in *disengagement*. While useful for understanding phased responses to racism, this model needs further refinement to determine its applicability to varying identities as well as at the intersections of identities; assuming validity across multiple identities, this model offers options for targeted interventions depending on the social location of the individual in the stages (e.g., social support groups for those in the disengagement stage).

Participants also noted the impacts of bullying on their sense of self and how it ignited negative emotions and drove poor academic performance. The links between bullying victimization and mental health are well documented (Laith & Vaillancourt, 2022). Furthermore, it is well established that bullying impacts academic performance (Kibriya et al., 2017; Woods & Wolke, 2004). Regardless, there is a scarcity of literature in the Canadian context that explores Black Canadians experiences of bullying. Identified

studies focus on racism (Baker et al., 2001) as an overarching experience rather than bullying. There is even less literature at the intersection of race and weight bullying. Given how interpersonal interactions impact the everyday lives of individuals a paucity of literature inhibits the ability to develop evidence-based recommendations, implement targeted interventions, and inform policy.

A Journey to self-compassion

The social support provided to participants by family and friends acted as a space where participants could feel safe. Family and friends created this space through providing unconditional love and non-judgmental support for participants' weight and race identities. This sheltered them from experiences of oppression. Where participants discussed social support as a haven that enabled them to develop their self-compassion, extant literature suggests a more complicated relationship. Ajrouch et al., (2010) noted that while social support may reduce the psychological distress of everyday discrimination it does not prevent the acute stress of consistent perceptions of discrimination. Further, increases in support for race discrimination over time predict decreases in depressive symptoms for African-American women; however, increases in generalized support do not (Seawell et al., 2014). Existing literature suggests a nuanced protective factor of social support for those facing oppression; however, no studies account for the sense of pride that participants noted as a part of being Black. This sense of pride may mediate the relationship between social support and discrimination as a shared collective identity implies a network of social support. Religious community support has been associated with overall better health, particularly for African Americans (Levin, 2010), however, religious community was not discussed by participants in this

study. Conversely, spirituality has been noted as being of particular importance in the lives of African Nova Scotians (Beagan et al., 2012; Beagan & Etowa, 2011; Bernard et al., 2014). Spirituality may be a setting for exploring the impact of community level support on mitigating discrimination for Black Canadians in Nova Scotia.

The safe space created by family and friends allowed participants to develop a sense of self-compassion and improved self-esteem as they grew older. This is consistent with findings that social support is associated with increased self-esteem (Feeney & Collins, 2015) and self-compassion (Zhou et al., 2022). Social support may play a pivotal role in developing self-compassion, in turn, self-compassion has demonstrated a protective capacity against discrimination. Specifically, self-compassion moderates the relationship between experiences of racism and negative mental health outcomes in African Americans (Emery, 2020). Further, self-compassion is reported as a protective against internalized weight-bias (Braun et al., 2021). Thus, self-compassion may be a pertinent target area for assisting those with intersecting identities to counteract oppression in their everyday lives.

Self-compassion interventions are an option to improve the self-esteem and well-being of individuals with intersecting identities that are subjected to overlapping oppression. A recent study by Hopkins (2022) reported that a 4-week self-compassion intervention reduced internalized weight-bias. Results indicated that increasing self-compassion can reduce internalized negative self-perceptions. However, this study did not explore demographics of participants that would point to effectiveness across the intersection of individuals' identities. Participants in this study noted a desire for social

support groups which provide an avenue of exploration for self-compassion interventions through social support for Black Canadians with intersecting identities.

Strengths, Significance, and Implications

The implications of this study have the potential to be far reaching. Participants in this study had the opportunity to reflect and discuss their experiences of weight and race identities throughout their lives. As an under-researched area and aligned with the stigma associated with excess weight, it may have been one of the first times participants had an opportunity to reflect on the intersections of weight and race and how it had impacted them, in an environment that valued their stories. This may have prompted discussions between participants and their social groups across varying settings.

This study also had implications for me as the researcher. Particularly, it was an opportunity to hone my qualitative research skills. This project serves as partial fulfillment of the requirements for a masters' degree. Further, it was an opportunity for me to explore complex and nuanced experiences and concepts to further educate myself with respect to theory and lived experience.

Community organizations and health systems may also take learnings from this study. The request from participants and findings that highlight social support and self-compassion as positive influences on the lives of participants offers opportunity for program implementation that addresses these constructs. One example could be a community support group for Black Nova Scotians living with overweight or obesity, similar to support groups for other highly stigmatized identities. Another avenue for intervention is addressing healthcare practitioners' biases as they relate to weight status and race, among other intersectionalities.

This research also has implications for the field of Health Promotion. Primarily, it adds to the current (lack of) literature exploring the application of intersectional frameworks in the field, specifically relevant to weight stigma. Further, this study foregrounds emerging current understanding and models to develop deeper knowledge of lived experience to better enable people to achieve their health potential.

To my understanding, this study is the first to explore the intersections of race and weight and how they impact the everyday lives of Black Canadians in Nova Scotia. As such, it adds to the literature. Focusing primarily on weight and race allowed detailed analysis of an understudied intersection of Black Canadian identities. Through the dual use of intersectionality and the SEM, the study embraced complexity to uncover nuances of experience that may be overlooked by singular theoretical approaches. Participants noted the study as a space to share their concerns and be heard. Furthermore, there is congruence between the emphasis on experience that is aligned with pragmatism, the methodological flexibility of reflective thematic analysis, and the hybrid model applied for this study.

Limitations

First and foremost, this study is limited by an outsider's interpretation of Black Canadians' experiences with race and weight. As I do not identify as a Black Canadian, I recognize that I cannot and will not, fully understand the experiences of the participants of this study. Reflexive thematic analysis recognizes the positionality of the researcher as crucial to the interpretation of data and therefore was adopted as a recognition of my positionality and the influence, I, as a researcher, would have on interpretations of data. The explicit selection of committee members based on their a) lived experience and b)

expertise (clinical, community and research) played a role in developing my personal understanding of Black perspectives and aided in constructing my interpretations.

While exploring two identities allows a deep and nuanced analysis, this study may be limited by restricting exploration of identities to race and weight. Confining an intersectional analysis to two identities limits the breadth of exploration around how oppression can impact everyday lives. For example, undertones of gender emerged through participant discussion, but without explicit focus on this identity the nuances around how gender may have intersected with race and/or weight were not explored.

The lack of demographic data collected also impinges on the ability to explore further intersections in the everyday lives of the participants. Personal information was not collected in this study primarily due to the sensitive nature of these data which could prevent the development of rapport with my participants. Thus, asking these questions ran the risk of limiting participation in the weight and race discussions necessary for this project's success. Further, my name is unfamiliar to many community members as I have not had the time necessary to develop relationships and trust with the community. Probing into personal details beyond the scope of the study without having developed these relationships could create significant challenges or harm for community members. Despite working closely with well-known community members, it is still necessary to not overstep the bounds of this study and as I continue to build meaningful relationships and earn community trust I may begin to incorporate broader research topics into my work.

Finally, the adoption of a complex yet undefined hybrid model may limit interpretations of data. Given that the hybridization of intersectionality and SEM is a fairly new theoretical framing, the model is not yet well defined, nor has it been applied

to Black populations in Nova Scotia. An undefined model may weaken conceptual clarity and impact interpretation of results. Further, given variances between Africentric and Western paradigms, the model may not be of relevance to the target population. Regardless, intersectionality and the SEM have been individually applied to Black populations and thus there is little reason to believe hybridization weakens the applicability of the two approaches to the population of interest. In fact, intersectionality has been argued to better position and represent populations that have been marginalized (Crenshaw, 1989).

Knowledge Translation

Knowledge generated from this study will be shared with participants as a brief infographic explaining the findings of this study and the implications that arise from it. Additionally, Nova Scotia Health has two initiatives (the Brotherhood and the Sisterhood) that specifically target Black health in the province. I intend to share the results with representatives of these initiatives as they played a role in recruitment for the study. Further, the recommendation of community-based support groups for Black Canadians living with overweight or obesity will be passed along to these initiatives.

Recommendations for Future Research

There is a dearth of literature exploring Black health and Black health outcomes in the Canadian context. In fact, the most up to date obesity rates for Black Canadians that could be located were from 2005 (Tremblay et al., 2005). Given the lack of an evidence base to inform decision-making on Black health in Nova Scotia, several recommendations for future research have arisen. Firstly, weight in the Black community needs to be further explored to counteract underrepresentation in the literature. A

longitudinal study on the impacts of bullying experiences for Black students would allow for a better understanding of how such experiences track into adulthood to shape self-esteem, self-compassion, and overall well-being of participants. Further, self-compassion as a mediator for everyday discrimination should be explored in Black Canadian populations to better understand the mechanisms for protecting against the stress of everyday discrimination.

Outside of Black health, the application of a dual-use intersectionality and SEM model presents many opportunities. Future research in this field should seek to formally hybridize the two theories to provide a cohesive structure and framework that guides researchers through analysis. Specifically, which of the iteration of Bronfenbrenner's socioecological model and its adaptations best integrates with intersectionality. For example, the model used here (Bronfenbrenner, 1977) may not be as useful as McLeroy's (1988) as it doesn't explicit distinguish between what is internal and external to the individual. That is, it is either all housed in the microsystem, or the microsystem fails to recognize internal processes and concepts (i.e., identity formation, self-compassion) due to its focus on the immediate setting in which the individual is located. Further, the longitudinal study above necessitates a consideration of the influence of systems over time. More recent adaptations of the SEM (Bronfenbrenner, 1986; Bronfenbrenner & Ceci, 1994; Bronfenbrenner & Morris, 2007; McLeroy et al., 1988) may incorporate the mechanisms that moved participants from the negative emotions arising out of bullying in childhood to an acceptance of self. Finally, future researchers should carefully consider whether it is intersectionality or the SEM that is foregrounded through the hybridization of these two models. Here, the SEM emerged as dominant. This may be the case as it is a

commonly used model in Health Promotion; whereas, intersectionality is underutilized in Health Promotion (Heard et al., 2020).

Future studies may also consider directing focus toward understanding macrosystem prototypes from the perspective of Black Canadians living with obesity. Participants did not discuss prototypes (e.g., white supremacy and the trans-Atlantic slave trade) in this study. Novel research has begun to emerge associating addressing obesity and White Supremacy (Dean & Liebow, 2022; Strings & Bacon, 2020). Explicit questions probing participant perceptions of known macrosystem prototypes is one method of exploring links between the everyday lives of Black Canadians and overarching structures within the culture. A formal hybridized model may allow for specific consideration of these associations.

Conclusion

A scarcity of literature on Black health in the Canadian context, has resulted in little knowledge of how race and weight intersect to impact the lives of Black Canadians. Existing literature highlights the pervasive nature of oppression faced by those living with obesity and those who identify as Black. This research filled a crucial gap in the literature through one-on-one interviews with Black Canadians living in Nova Scotia, exploring their race and weight identities. Specifically, this study explored how race and weight positively and negatively impacted the everyday lives of adult Black Canadians. Grounded in an emerging hybridization of the SEM and intersectionality to explore these complex and nuanced issues, three themes were theorized: *Identity as multifaceted and complex*, *The two things that people remind you of*, and *Social support and its impacts on sense of self*. Findings revealed that participants' constructions of identity followed two

lines of thought a) as the sum of a set of characteristics, and b) as a socially constructed concept. Race and weight intersected and compounded to have negative impacts on participant's overall sense of self and well-being enacted in the microsystem (i.e., interpersonal interactions in varying settings) as a manifestation of macrosystem ideologies. Social support played a crucial role in participants' journeys through life and their self-compassion and self-esteem. This research provided an opportunity to better understand how race and weight intersect to impact the everyday lives of Black Canadians living in Nova Scotia.

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Appendix A: Ethics Approval Letter



Social Sciences & Humanities Research Ethics Board
Letter of Approval

September 01, 2022
Joshua Yusuf
Health\School of Health and Human Performance


Dear Joshua,

REB #: 2022-6225
Project Title: Exploring the intersection of race and weight in the everyday lives of African Nova Scotians

Effective Date: September 01, 2022
Expiry Date: September 01, 2023

The Social Sciences & Humanities Research Ethics Board has reviewed your application for research involving humans and found the proposed research to be in accordance with the Tri-Council Policy Statement on *Ethical Conduct for Research Involving Humans*. This approval will be in effect for 12 months as indicated above. This approval is subject to the conditions listed below which constitute your on-going responsibilities with respect to the ethical conduct of this research.

Sincerely,



Dr. Megan Bailey
Chair, Social Sciences and Humanities Research Ethics Board
Dalhousie University