Abstract 16 Table 1 Suggestions to minimise weight bias and stigma (n=83)

Comments relevant to minimising weight bias & stigma	n=59 (71%)
Treat individuals with obesity with respect & kindness. Show empathy	38 (64%)
Use 'Person-first Language'	11 (19%)
Promote education regarding consequences of weight bias/stigma	2 (3%)
Judge less & understand obesity is a complex disease that requires various forms of treatment	7 (12%)
Find a balance between 'body confidence & glorifying a disease'	1 (2%)
Comments related to body acceptance initiative	**n=24 (29%)**
'Love your body'	14 (58%)
'Accept that everyone comes in different sizes'	10 (42%)

suggestions were categorised into common sub-groups as shown in table 1.

Results 101 students and staff pledged their support and 83 gave a suggestion to minimise weight bias/stigma. In the latter group, the majority (71%) had a sound understanding of weight bias and stigma. However, 24 participants (29%) appeared to have confused the body acceptance initiative with reducing weight bias and stigma (table 1). This was further verified through their interaction and comments with the volunteers at the stall.

Conclusion This pilot evaluation provides empirical evidence that 'minimising weight bias/stigma' and the 'body acceptance initiative' may be easily confused and even addressed interchangeably. Education initiatives to distinguish between these concepts is warranted to reduce weight-related stigma and improve access to care for individuals with obesity.

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17   CREDIBILITY AND REACH OF NUTRITION INFLUENCERS ON SOCIAL MEDIA

[1]Melissa A Fernandez*, [2]Anne Caretero, [3]Eyasu Jacob, [3]Josh Karatha, [1]Kim D Raine. [1]School of Public Health, University of Alberta, Canada; [2]Agriculture, Food and Nutritional Science Department, University of Alberta, Canada; [3]WISEST Summer Research Program, University of Alberta, Canada

Background Nutrition influencers can reach large segments of the public, regardless of formal training or credentials. Though social media is a popular source of nutrition information, it may not be credible. Furthermore, the perceived credibility of nutrition information may be enhanced through social validation (i.e., popularity of the public figure), yet this phenomenon has not been examined.

Objective To examine the credibility of nutrition influencers' websites in relation to their social media reach.

Methods Nutrition influencers identified through a key word search on popular search engines: Yahoo! Google, and Bing who had active public websites and Instagram accounts were included. 'Tips to Spot Misinformation' developed for the public by the Dietitians of Canada and PEN: Practice Evidence-Based Nutrition were used to create a credibility score for each website. Based on scores, websites were categorized as having low, moderate, or high credibility. The reach of each influencer was ascertained by combining the total number of followers/subscribers from five popular social media platforms (Instagram, Facebook, Twitter, YouTube, and Pinterest).

Results Of the 39 websites, there were 12 (31%) high, 13 (33%) moderate, and 14 (36%) low credibility sites, and the average number of followers for each group were 186 775, 547 088 and 2 153 515, respectively. There was a significant difference in followers between the three groups (p = 0.017) and a significantly lower number of followers for influencers with high credibility websites compared to low credibility websites (p = 0.022), with more than 10 times fewer followers.

Discussion Popular influencers with low credibility websites have enormous reach whereas influencers with highly credible websites lack the ability to reach large segments of the population. Further research is needed to understand how social validation influences the public's eating behaviors and to identify strategies that will increase the visibility of highly credible information.

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18   MAPPING DATA OPPORTUNITIES RELATING TO FOOD, NUTRITION AND HEALTH IN THE COVID-19 PANDEMIC

Dominic Crocombe*, Luke Buckner, Marjorie Lima do Vale, Elaine Macaninch, Suzana Almoosawi, Sumantra Ray. *NNEPro Global Centre for Nutrition and Health, St John's Innovation Centre, Cambridge, UK*

Background The COVID-19 pandemic has impacted the nutrition and health of individuals, households, and populations globally. Through exposing fragilities in food, health, and social welfare systems, the negative influence of COVID-19 continues to affect the global burden of malnutrition. The nature and scale of these impacts are not yet well understood thus the body of evidence for informing policy is limited. Collating and monitoring relevant data in real-time from multiple levels, sectors and sources is essential in preparing and responding to the ongoing COVID-19 pandemic.

Objectives To identify key data sources related to food, nutrition, and health indicators in the context of the COVID-19 pandemic.

Methods A COVID-19, food, nutrition and health framework was developed through multiple iterative rounds of online multidisciplinary discussions including the NNEdPro COVID-19 taskforce and the Swiss Re Institute's Republic of Science, which comprised researchers and clinicians with expertise in data science, food, nutrition, and health.

Results The proposed framework encompasses five socio-ecological levels which were further sub-divided by six categories of the food and nutrition ecosystem, including food production & supply, food environment & access, food choices & dietary patterns, nutritional status & comorbidities, health & disease outcomes, health & nutrition services. A limited number of exemplar variables for the assessment of global status