

SUPPLEMENTARY DATA

Supplementary Table 1: A comparison of measured and self-reported BMI on a sub-sample of participants of the Canadian Community Health Survey Cycle 3.1. (N=4202)*

		N	Mean self-reported BMI (kg/m ²)	Mean measured BMI (kg/m ²)	Mean difference in BMI (kg/m ²)	% concordance†	Cohen's kappa‡
Ethnic group							
	White	3936	25.5	26.8	-1.2	90.5	0.70
	South Asian	79	24.3	25.5	-1.2	79.7	0.60
	Chinese	138	22.3	22.7	-0.4	87.0	0.60
	Black	49	27.1	29.0	-1.9	87.8	0.76

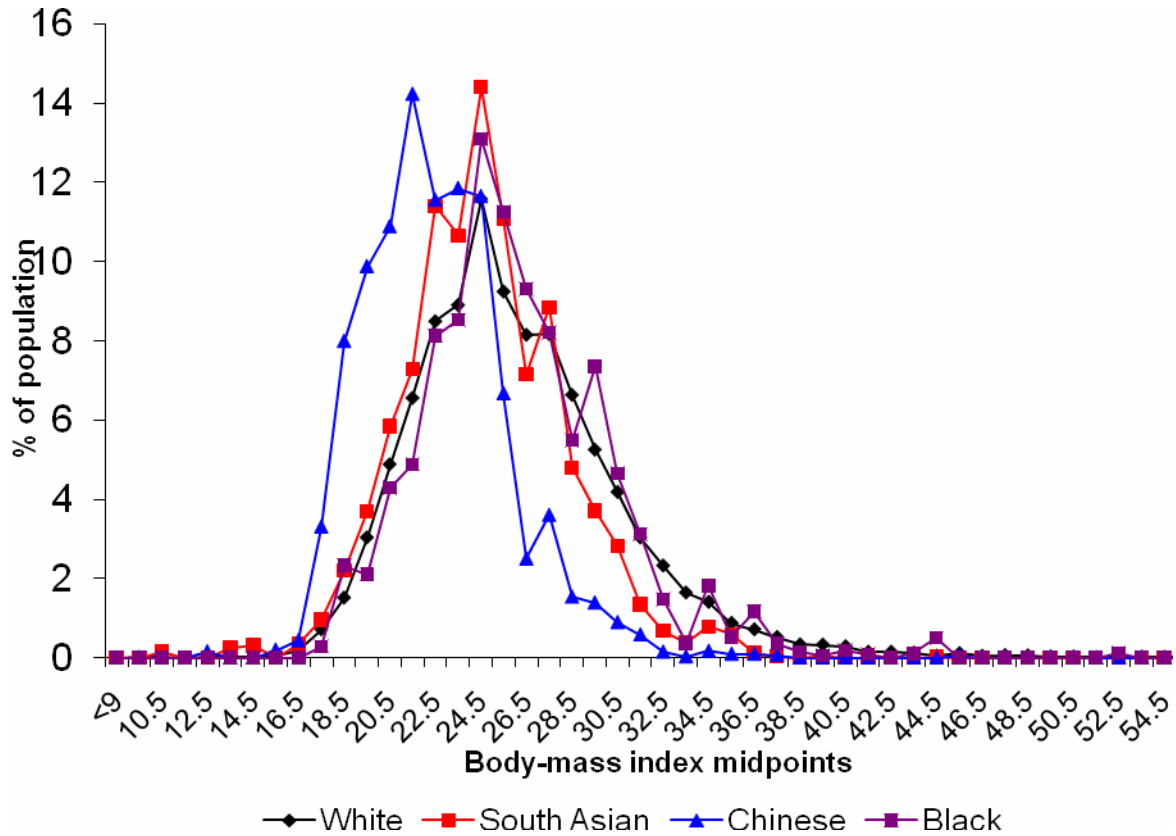
*Data on self-reported and measured BMI were available on a sub-sample of the Canadian Community Health Survey (CCHS) Cycle 3.1 (2005).

†Percent concordance and Cohen's kappa (a highly conservative measure of agreement) were calculated using ethnic-specific BMI cutoff points found in the study, i.e. 30, 24, 25, and 26 kg/m² for White, South Asian, Chinese, and Black, respectively. Reference: Cohen, Jacob. (1960) A coefficient of agreement for nominal scales, *Educational and Psychological Measurement* Vol.20, No.1, pp. 37–46.

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Supplementary Figure 1: Distribution of body-mass index in study cohort, by ethnic group.

The study cohort included 57,210 White, 1001 South Asian, 866 Chinese and 747 Black participants living in Ontario. All estimates were weighted by the survey sample weight to allow for estimates to be generalizable to the overall Ontario population. Data were derived from the Ontario components of Statistics Canada's National Population Health Survey and Canadian Community Health Surveys, 1996-2005.



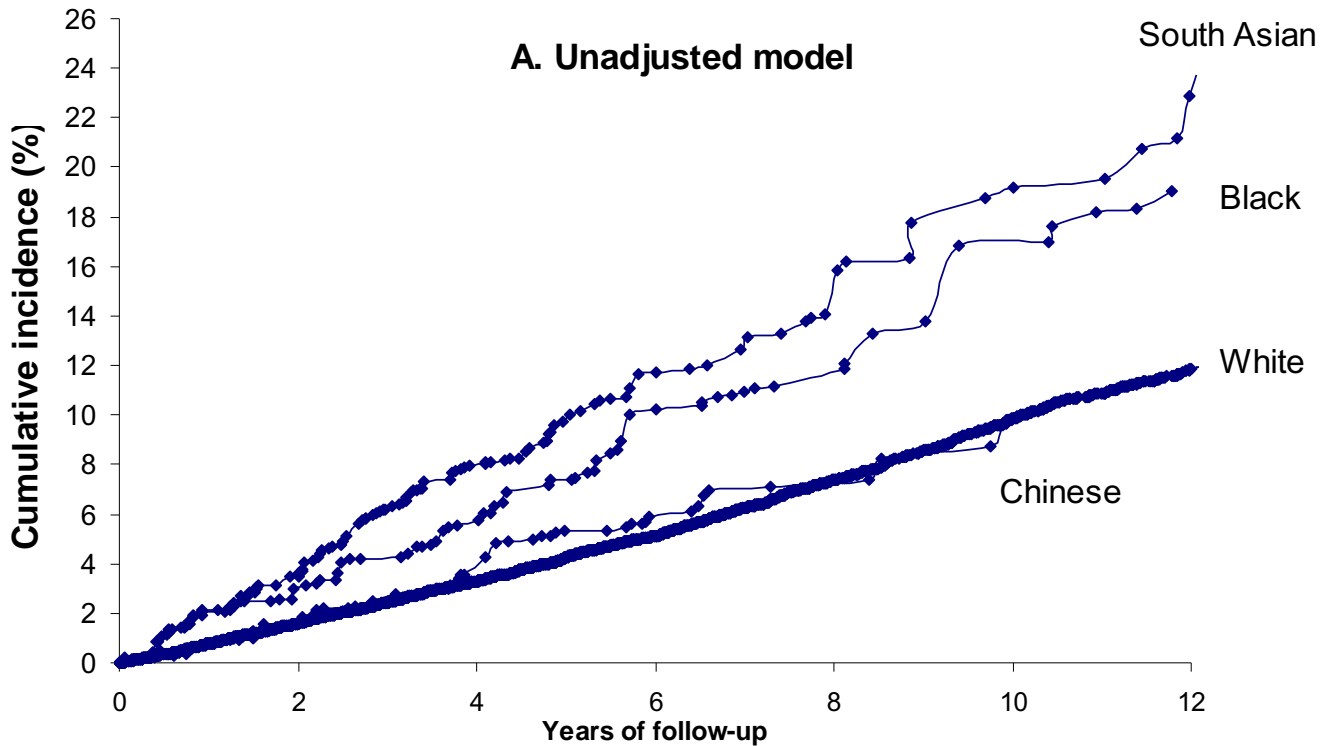
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Supplementary Figure 2: Cumulative incidence curves for incident diabetes, by ethnic group in Ontario.*

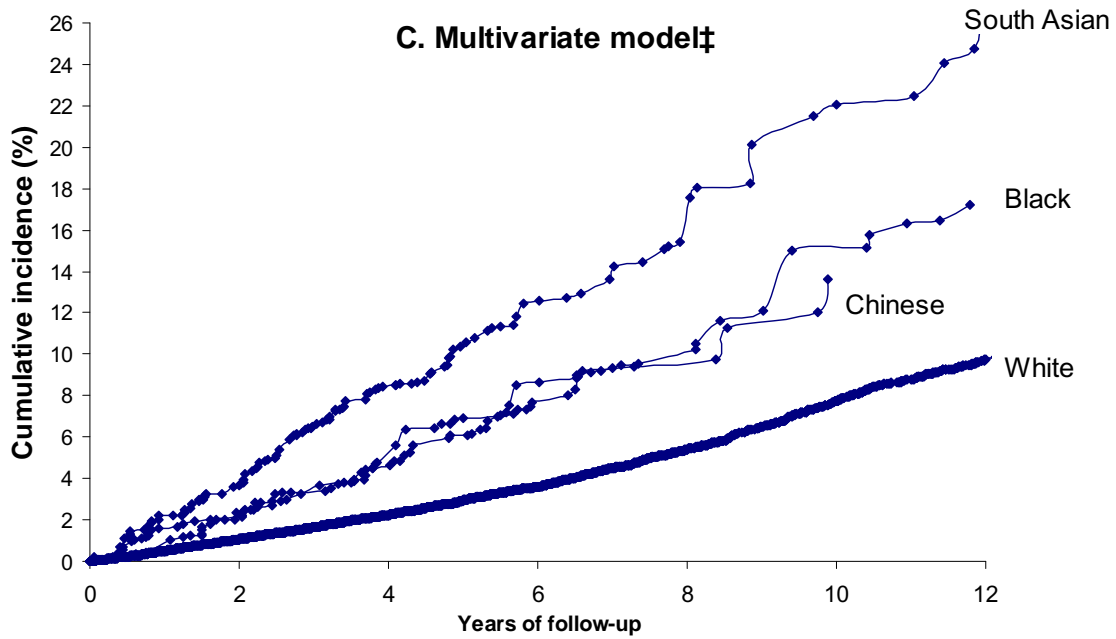
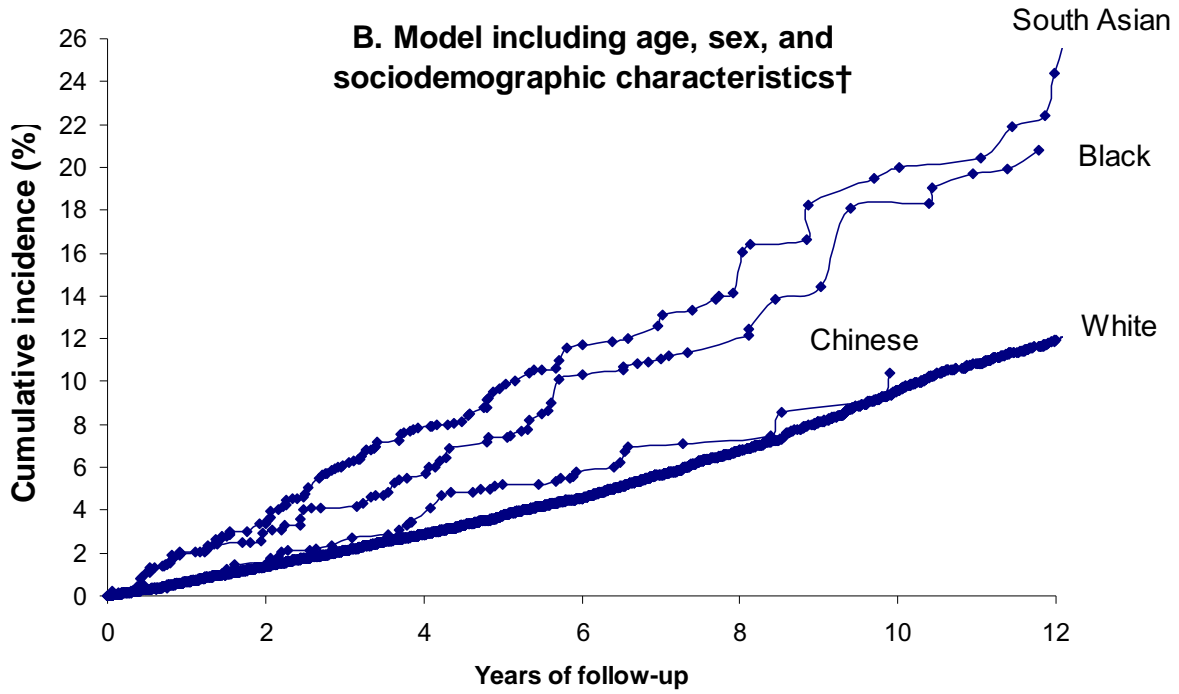
*The study cohort included 57,210 White, 1001 South Asian, 866 Chinese and 747 Black participants living in Ontario. All estimates were weighted by the survey sample weight to allow for estimates to be generalizable to the overall Ontario population. Data were derived from the Ontario components of Statistics Canada's National Population Health Survey and Canadian Community Health Surveys, 1996-2005.

†In a hypothesized population with 49.5% males; mean age: 48.0 years; 69.2% in urban dwelling; distribution of income adequacy (lowest: 6.7%, lower-mid: 17.5%, mid-higher: 35.4%, highest: 40.4%, a measure of socioeconomic status derived by Statistics Canada); and distribution of survey year (1996: 21.4%, 2001: 27.1%, 2003: 27.1%, and 2005: 24.3%).

‡In a hypothesized population with 49.5% males; mean age: 48.0 years; 69.2% in urban dwelling; distribution of income adequacy (lowest: 6.7%, lower-mid: 17.5%, mid-higher: 35.4%, highest: 40.4%); distribution of survey year (1996: 21.4%, 2001: 27.1%, 2003: 27.1%, and 2005: 24.3%); mean BMI: 25.9 kg/m²; 24.9% smokers, and 13.3% hypertensive.



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Numbers at risk							
	Baseline	1 year	5 years		10 years	12 years	
White	57210	56489	40083		9189	5706	
S. Asian	1001	985	641		122	74	
Chinese	866	862	580		83	56	
Black	747	733	506		120	72	

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Supplementary Figure 3: Distribution of body-mass index in study cohort, by ethnic group, sensitivity analysis using 5 knots for cubic splines. The multivariate Poisson regression model included age, sex, BMI, BMI-ethnicity interaction, age-BMI interaction, income adequacy, survey year, and urban vs. rural dwelling. Five knots were used to generate the restricted cubic splines. All estimates were weighted by the survey sample weight to allow for estimates to be generalizable to the overall Ontario population. Data were derived from the Ontario components of Statistics Canada's NPHS and CCHS surveys, 1996-2005.

