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A study on problems faced by women due to obesity and overweight with special reference to Erode District

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ABSTRACT

Obesity is a public health problem that has become epidemic worldwide. Substantial literature has emerged to show that overweight and obesity are major causes of co-morbidities, including type II diabetes, cardiovascular diseases, various cancers and other health problems, which can lead to further morbidity and mortality. The related health care costs are also substantial. Therefore, a public health approach to develop population-based strategies for the prevention of excess weight gain is of great importance. However, public health intervention programs have had limited success in tackling the rising prevalence of obesity. This paper reviews the definition of overweight and obesity and the variations with age and ethnicity; health consequences and factors contributing to the development of obesity; and critically reviews the effectiveness of current public health strategies for risk factor reduction and obesity prevention.

INTRODUCTION

Obesity is a medical condition in which excess body fat has accumulated to an extent that it may have a negative effect on health. People are generally considered obese when their body mass index (BMI), a measurement obtained by dividing a person's weight by the square of the person's height, is over 30 kg/m²; the range 25–30 kg/m² is defined as overweight. The evidence for the adverse effects of obesity on women's health is overwhelming and indisputable. The prevalence of obesity is rising. The World Health Organization estimates that more than 1 billion people are overweight, with 300 million meeting the criteria for obesity. Twenty-six percent of non-pregnant women ages 20 to 39 are overweight and 29% are obese. Obesity is a public health problem that has raised concern worldwide.

STATEMENT OF THE PROBLEM

Obesity and overweight have a global epidemic now. The problem of overweight or obesity is no more restricted only to the developed world. Presently, the epidemic poses new challenges in developing countries and urges immediate attention and prevention. Hence, the goal of this paper is to review previous literature and discuss why obesity related chronic diseases are emerging health problems among women.

OBJECTIVE OF THE STUDY

- ❖ To identify the Demographic Profile of Respondents.
- ❖ To identify the psychological Problems faced by the women due to obesity and overweight

SCOPE OF THE STUDY

- ❖ This study helps to know about the problem faced by the women who is having obesity and overweight.
- ❖ The present study will This study helps to know about the reasons for obesity and overweight of women.

LIMITATIONS OF THE STUDY

- ❖ It has been difficult to find the overweight people.
- ❖ Many respondents hesitated to till the from, because question is based on overweight.
- ❖ They gave very formal answers since it is based on their personal.

LITRETURE REVIEW

- ❖ **Katz, D.L.; O'Connell, M.; Njike, V.Y.; Yeh, M.C.; Nawaz, H** in *International Journal of Obesity* volume **32**, pages 1780–1789 (2008) has determined the effectiveness of school-based strategies for obesity prevention and control using methods of systematic review and meta-analysis.
- ❖ **Angelopoulos, P.D.; Milionis, H.J.; Grammatikaki, E.; Moschonis, G.; Manios, Y** in *European Journal of Public Health*, Volume 19, Issue 3, 1 June 2009, aims aims to evaluate the effectiveness of an intervention program, based on the Theory of Planned Behaviour (TPB), on obesity indices and blood pressure (BP).
- ❖ **Polikandrioti Maria, Stefanou Evagelia in Health Science Journal,2009** said that obesity is considered as the major health problems in developing and developed countries.

RESEARCH METHODOLOGY

Research design

A Master plan that specifies the method and procedures for collecting and analysing needed information.

Descriptive design

Descriptive research design is used for the study; it is a fact finding investigation with adequate interpretation.

Sample design

Sampling is the process of selecting a sufficient number of elements from the population. A Sample Design is a definite plan for obtaining a sample from the sampling frame. It refers to the technique or the procedure the researcher would adopt in selecting some sampling units from which inferences about the population is drawn.

Non- probability sampling

Non-Probability sampling is a sampling technique where the samples are gathered in a process that does not give all the individuals in the population equal chances of being selected.

Convenience sampling

Convenience sampling (also known as Availability Sampling) is a specific type of non-probability sampling method that relies on data collection from population members who are conveniently available to participate in study.

Size of the sampling

The Sample size is **100**.

Data collection method

Primary data

These are data which are collected for the first time directly by the Researcher for the Specific study undertaken by researcher. In this research primary data are collected directly from the Respondent by using Questionnaire cum Enumeration Method.

Secondary data

These are data which are already collected and used by someone preciously. The data are collected from journals, magazines and websites.

Statistical tools used

To analyse and interpret collected data the following simple percentage and ranking were used.

Simple percentage analysis

To analyse and interpret collected data the following simple percentage and ranking were used.

Formula

$$\text{Percentage analysis} = \frac{\text{Number of respondents}}{\text{Total number of respondents}} \times 100$$

Henry garret ranking method

Garrett's ranking technique to find out the most significant factor which influences the

respondents; Garrett's ranking technique was used. As per this method, respondents have been asked to assign the rank for all factors and the outcomes of such ranking have been converted into score value with the help of the following formula:
Percent Position
= $100 (R_{ij} - 0.5) / N_j$ Where R_{ij} = Rank given for the i^{th} variable by j^{th} respondents N_j = Number of variable ranked by j^{th} respondents.

DATA ANALYSIS

The Respondents participated in the research are from diversified background with gender, age group, marital status, educational qualification, height, and weight.

TABLE NO 1: DEMOGRAPHIC PROFILE OF THE RESPONDENTS

Details of the respondents		No. of the respondents	percentage
Age	Below 20 years	10	10
	21-30 years	45	45
	31-40 years	34	34
	Above 40 years	11	11
	Total	100	100
Academic qualification	Below 10 th	10	10
	10 th -12 th	24	24
	UG	53	53
	PG	13	13
	Total	100	100
Occupation	Student	32	32
	Government	12	12
	Private	43	43
	Business	13	13
	Total	100	100
Marital status	Married	59	59
	Unmarried	41	41
	Total	100	100
Height (cm)	Below 150	19	19
	150-160	45	45
	160-170	32	32
	Above 170	4	4
	Total	100	100
Weight (kg)	Below 60	23	23
	60-70	36	36
	70-80	32	32
	Above 80	9	9
	Total	100	100

SOURCE: PRIMARY DATA

Interpretation

From this study it is evident that age group of the 45% of the respondents fall under the category of 21 – 30 years, 53% of the respondents' academic qualification is Under Graduate, the occupation of 43% of the respondents fall under

the category of Private, 59% of the respondents fall under the category of Married, 45% of the respondents fall under the category of 150-160 cm height, 36% of the respondents fall under the category of 61-75 kg weight.

Table no 2: Rank of the problems faced by women due to obesity and overweight

S. No	Problems	Mean score	Total score	Rank
1	High cholesterol	381	3810	4
2	Sleep apnoea	555	3330	5
3	Inferiority	549	3843	3
4	Pregnancy problem	527	4216	1
5	Doing household chores	560	2240	7
6	Teasing	556	2780	6
7	Lowered self-esteem	648	1296	9
8	Anxiety	595	1794	8
9	Heart diseases	660	660	10
10	Depression	460	4140	2

Source: Primary Data

Interpretation

From this study, it is found that from the table it is evident that, PREGNANCY PROBLEM is

ranked as no.1 with the total score of 4216, DEPRESSION is ranked as no.2 with the total score of 4140, INFERIORITY is ranked as no.3 with the total score of 3843.

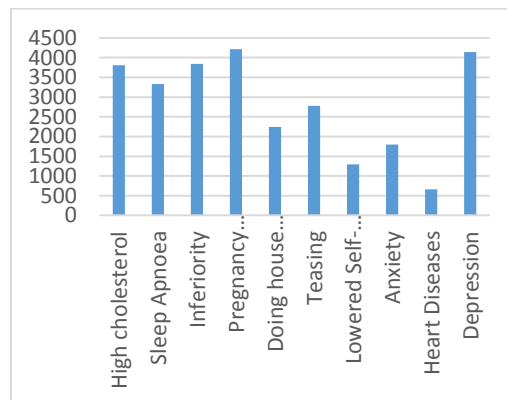


Figure no 1: Problems faced by women due to obesity and overweight

FINDINGS

- ❖ **Pregnancy Problem** is ranked as no.1 with the total score of 4216,
- ❖ **Depression** is ranked as no.2 with the total score of 4140,
- ❖ **Inferiority** is ranked as no.3 with the total score of 3843.

SUGGESTIONS

- ❖ More tablet usage during pregnancy can be reduced and proper traditional diet can be followed.
- ❖ Problem solving therapy can be undergone.
- ❖ We can avoid our inner negative desires and surround ourselves with good vibes with increased self-confidence.

CONCLUSION

The health risks and health care costs associated with overweight and obesity are considerable. The prevention and reduction of overweight and obesity depend ultimately on individual lifestyle changes, and future research on

motivations for behaviour change would be important in combating the obesity epidemic. Therefore, psychological and behavioural issues play significant roles in obesity. Hence if can be resolved by our good diet and desires.

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