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Preventives Measures to Overweight with Related Effects

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Abstract **Original Research Article**

The intake of High calories dense food without participations on Physical Activities to break down food to the simplest composition of the smallest particles of molecules, that will lead to Overweight or Obesity, approach on Check-list apparatus in weight management is employed as time saving factor to healthy life. The Study therefore determined related effects to overweight and its preventives measures. 50 teachers samples were collected for this study. Average (BMI) of 26.7 ± 5.9 kg/m^2. BMI and blood pressure measurements were taken using standard techniques. BMI was classified using the National Institutes of Health criteria, 2000. Pearson's product moment correlation coefficient at 0.05 level of significance was used to test the relationship between variables. Based on BMI, the Associations of overweight are generalized obesity in Training Colleges, were 31.7% and 25.5%, respectively. And it preventives measures using check list apparatus in weight management as physical and Health education intervention which, when to eat will be a time factor as Measuring tools, what to eat as healthy dieting on what type of food must be placed as measuring tools and what we do, will be another measuring tools base on physical activities.

Keywords: BMI, significance, Health education, physical activities.

INTRODUCTION

By WHO, in 2016, more than 1.9 billion adults aged 18 years and older were overweight. Of these over 650 million adults were obese, and in 2016, 39% of adults aged 18 years and over (39% of men and 40% of women) were overweight. Total estimation is about 13% of the world's adult population (11% of men and 15% of women) were obese in 2016. Which says that the worldwide prevalence of obesity nearly tripled between 1975 and 2016.which in 2016, an estimated 41 million children under the age of 5 years were overweight or obese. Once considered a high-income country problem, overweight and obesity are now on the rise in low- and middle-income countries, particularly in urban settings. In Africa, the number of overweight children under 5 has increased by nearly 50 per cent since 2000. Nearly half of the children under 5 who were overweight or obese in 2016 lived in Asia. Over 340 million children and adolescents aged 5-19 were overweight or obese in 2016. The prevalence of overweight and obesity among children and adolescents aged 5-19 has risen dramatically from just 4% in 1975 to just over 18% in 2016. The rise has occurred similarly among both boys and girls: in 2016 18% of girls and 19% of boys were overweight. While just under 1% of children and adolescents aged 5-19 were obese in 1975, more 124 million children and adolescents (6% of girls and 8% of boys) were obese in 2016 [1]. Furthermore, the Star Online in 2014 reported that its obesity index has Malaysia as the highest ranked country in Asia and showed that 49% of women and 44% of men in Malaysia were found to be obese. Malaysia was rated most obese at 45.3% of its population, followed by South Korea (33.2%), Pakistan (30.7%) and China (28.3%). An article by Nicholas Cheng published on second of April 2016, says, "It has been known that Malaysia is the fattest country in South-East Asia". The article boasts of a proof that the administrative capital of Putrajaya has the highest overweight and obese people in the country.

Also, findings from the 2015 National Health and Morbidity Survey (NHMS) placed Putrajaya as the city with the highest percentage of overweight people suggesting that the administrative capital population's obesity level stood at forty-three percent (43%). This could mean that two (2) out of every five (5) of Malaysia's civil servant is obese.

Data from the Prime Minister's office has it that Malaysia has the largest Civil Service in South East Asia with 1.4 million employees, yet a review of public health policy is said not to be necessary for now. However, the President of the Malaysian Medical

Association (MMA), Dr. Ashok Zachariah Philip, is of the opinion that the life of a typical government servant did not afford them much time or money to stay healthy because according to him, "it takes time and money to keep fit". He equally pointed out that the basic essentials of white rice, sugar, and oil were staple Malaysian diets and were unhealthy. This opinion starkly contradicts the carefree disposition of the Prime Minister on health policy.

Being Overweight is defined as growing more weight above normal. Oxford Advanced Dictionary defines 'Overweight' as 'being too heavy and fat, talking about 'Fat', a healthy body requires a minimum amount of fat for proper functioning of the hormonal, reproductive, and immune systems. It is true that Fat serves as thermal insulation, shock absorption for sensitive areas, and as energy for future use. But the accumulation of too much storage fat can impair movement, flexibility, and alter appearance of the body. Overweight is defined from the dictionary meaning as gaining more than average fatness; Medically it is seen as a condition in which excess body fat has accumulated to the extent that it may have a negative effect on health. People are generally pronounced obese when their body mass index (BMI), is measured and obtained by dividing a person's weight by the square of the person's height, is over 30 kg/m2, with the range 25–30 kg/m2 defined as overweight. WHO January 2015. Retrieved (2 February 2016). Some East Asian countries use lower values [2]. Obesity increases the likelihood of various diseases, particularly heart disease, type 2diabetes, obstructive sleep apnea, certain types of cancer, and osteoarthritis Body weight perception is a strong determinant of nutritional habits and weight management among adolescents. Adolescents who are underweight or normal weight but perceive themselves as overweight are at increased risk for eating disorders, People are generally considered obese when their body mass index (BMI) is over 30 kg/m^2. Body mass index, BMI is a measurement obtained by dividing a person's weight by the square of the person's height. Its normal value should always be lower than 25. The BMI range of 25–30 kg/m2 is defined as overweight WHO [3].

OUTLET TO OVERWEIGHT

Marian Fitzgibbon [4] examined on factors that influences obesity, on economic, lifestyle, and social. Provided an extensive outreach program that will used to inform both policymakers and households of which policies, programs, and practices are effective at combating obesity.

Economic Influences

Examine the relationship between obesity and a) prices of food and fast food; b) availability and accessibility as measured by local area food store and fast food/restaurant outlet density and physical activity-related outlet density measures; c) household income; and, d) assistance programs;

Lifestyle Influences

We will also examine the impact of economic factors on eating and physical activity patterns and, in turn, will examine the influence of the following lifestyle factors on obesity: a) food consumption patterns; b) physical activity; c) sedentary behaviors; and, d) attitudes toward food and health

Social Influences

Examine the relationship between adult obesity and community neighborhood safety controlling for economic factors.

While genetic influences are important to understanding obesity, they cannot explain the current dramatic increase seen within specific countries or globally, though it is stated that energy consumption in excess of energy expenditure leads to obesity on an individual, the cause of the shifts in these two factors on the societal scale is much debated. There are a number of theories as to the cause but most believe it is a combination of various factors [5].

Engagement to more manual activities and reduced use of Auto System; globalization is a major reason for this: It has brought McDonald's franchises to Mumbai and SUVs to Shanghai, digital TVs to Dar es Salaam and Nestles supermarket barges to the Amazon River delta. It has thus super-charged the "nutrition transition," a term for the obesity-inducing shift from traditional to Western diets that accompanies modernization and wealth. Institute of Medicine. Promoting Cardiovascular Health in the Developing World: A Critical Challenge to Achieve Global Health. Washington, D.C.: National Academies Press [6].

The outreach component of this project will disseminate our research findings in order to inform policy makers, health professionals, government officials and parents on potentially effective policies/regulations and tools to help address the obesity problem. We will develop a web-based resource for obesity-related material including relevant publications, policy briefs, fact sheets, and tool kits. Findings will provide policy makers with a better understanding of the extent to which economic incentives and environmental policy changes may serve as tools to modify Americans' eating and physical activity behaviors to help fight the obesity epidemic.

Preventive Measures on Overweight

Descriptive studies on How do we use our own body to judge the amount of diet components that we require for a body size or build, could our fist size be a guide to the amount of carbohydrate of each meal that is sufficient for us. The determinate on preventive of overweight among teacher's trainers in the Teachers

Terengganu College (TTC) it measure lay out will enhance practices to inform teachers of the dangers towards overweight.

First, humanity would largely benefit from this study as it tends to generally improve the wellbeing of man by making them conscious of how their habits and approach to life can make or mar their health. This research will also greatly contribute decreasing the population of obese people, with the application of its measures on this research, as a guild line of obesity management to public health. Furthermore, the date will cover the period from the 1990 to date for panel data analysis base on obesity and overweight as we intend to find and pick point factors relate to its cause. Also, the Malaysian government would save more and profit more, due to the fact that government budgets on Health would not have to be needlessly increased. This is because an acquired Malaysian culture of 'Eating Less but Quality in order to Live More with Style' would ensure a healthy workforce which would positively impact on the Malaysia economy. This would also increase the average life expectancy of citizens. As a result, government would not have to spend more on combating preventable obesity associated disease, but instead channel its attentions to other profitable ventures.

Prevalence of obesity irrespective of the anthropometric measure used ($p < 0.05$). Taking of snacks in meals, eating meals late at night, physical inactivity, excessive fast food intake, and alcoholic beverage intake were associated with increased prevalence of obesity ($p < 0.05$). Prevalence of obesity is high among diabetic patient and thus increasing effort towards developing and making education programs by focusing on adjusting to lifestyle modifications is required.

Saulo *et al*., [7] examined the prevalence and sociodemographic, occupational and lifestyle factors associated with overweight/obesity in state teachers from a north-eastern Brazilian city. A cross-sectional study involving teachers from the city of Jequié-BA initially selected by cluster sampling (schools) was conducted. The sample consisted of 300 teachers, including 72.7% (n=214) women. Sociodemographic, occupational and lifestyle data were investigated. Body weight and height were obtained by self-report. Prevalence ratios and 95% confidence intervals were estimated and a level of significance of 5% was adopted. The overall prevalence of overweight/obesity was 47.2%. The prevalence was significantly higher among male teachers (58.2%), married or cohabitating subjects (49.1%), whites and mulattoes (87.6%), teachers with an income > R$ 2,002.00 and a permanent contract (45.9%), and subjects who did not consume fruits or vegetables (49.1%). After multivariate analysis, only gender (95% CI = 0.16-0.66) and consumption of fruits and vegetables (95% CI = 0.25-0.98) remained significantly associated with overweight/obesity among teachers. These findings promote debate on the need for actions.

MATERIALS AND METHODS

The purpose of the study is to examine preventives measures to overweight with related effects, which we using teachers in Terengganu teachers training college as sample subject.

This section describes the systematic methods of implementation to accomplish it discussion on its collections choosing quantities method, of phenomenological research, using international cut –off point strategy on human to conduct this research. Ethical approval for this study was obtain from the teacher training college Terengganu Malaysia.

The cross – sectional descriptive study of all consenting teacher of the college carried out between July to August 2019. The quantitative design was employed to address the objective of this study.

The sample size was determined using the formula by Fisher's [8] for descriptive studies.

$$N=Z^2PQ/d^2$$

Where,

N = Minimum sample size
Z = Standard deviation scores at 95% = 1.96
P = 50.

RESULT

Designed to encourage the adoption of an active lifestyle by the teacher population.

Table-1: Analysis of the relationship between demographic variables and practices towards prevention of overweight among teachers in Terengganu College

Variables		N	r	p	Remark
Practices towards Prevention of Overweight		242			Significant
Demography	Gender		0.23	0.000	
	Religion		-0.09	0.15	Not Significant
	Marital Status		0.03	0.70	
	Level of Education		0.05	0.47	

$\alpha = 0.05$

Table-1 shows the result of a Pearson's correlation analysis which was carried out to determine the relationship that exists between demographic variables and practices towards prevention of overweight among teachers in Terengganu College. The result shows that for gender, $r = 0.23$, $p<0.05$; for religion, $r = -0.09$, $p>0.05$; for marital status, $r = 0.03$, $p>0.05$; and for level of education, $r = 0.05$, $p>0.05$ level of significance. Hence, the null hypotheses are rejected for gender but accepted for religion, marital status and level of education. This implies that gender has a significant relationship with practices towards prevention of overweight among teachers in Terengganu College while religion, marital status and level of education does have no.

CONCLUSION

The research focused on both primary and secondary data, for the secondary, thorough reviews will done by another researcher, and for the primary data, experimental techniques will be used as primary data of this study.

The experimental techniques are to gain observations on measurement of the height and weight, blood pressure, skin observation, and interview on dieting and physical activity on Teacher training college in Terengganu that is overweight, to enable measures to be introduced as time factor for management skills which is a checklist ingredient to human life.

Preventive mechanism has limited information on the perception of secondary school students regarding the risk factors of overweight and obesity. Therefore, this study is very important because the findings thereof will help in the management of obesity in adolescents and as well the Teachers who are the train Iconic director for the young.

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