

Obesity as an Overview Challenge Among People Trying to Lose Weight

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Abstract Background/Objectives: The study aim to investigate issues that contribute to obesity and weight gain problems as well as other economic and socioeconomic contributors in people of both genders. **Subjects/Methods:** The study settings was done as a focus for South African communities from adolescence and adults of all ages. Furthermore, the study looked at people or patients who reside from Africa, European countries and Asians countries as well. This was a meta-analysis and secondary data analysis study that looked into all the obesity articles and the challenges of patients and people struggling with weight through desktop research overview. **Results:** The sad disturbing findings were that obesity co-morbidities were reported among children and adolescents in the Middle East. Bariatric surgery acts as one of the problem solvers for fast effective weight loss among youth and adults who can afford the procedure. **Conclusion;** When people are determined to lose weight, they may rely on various mechanisms to be on the road to success without fear of not reducing their kilograms. Telling an African woman to lose weight might be a challenge because some of them they appreciate their weight or shape as they are and don't see a need to change.

Keywords: weight loss, obesity, social media, psychological and economic behaviour, economic imbalance, physical inactivity

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1. Introduction

The world is moving forward with obesity as something that is rising among youth in the 21st century especially since television and online media promotes it daily. Obesity is a challenge for many people in the world whether they are old or young among different racial groups. This reading looks deeper into the challenges faced by obese people and various factors contributing to obesity in general. This tends to be a natural topic for most of the people in either the townships, urban or and also rural areas. In South Africa, the use of pictures in the hope of posting them online via social networks is getting more attention daily. The study explores various elements that have an influence in weight loss and the obesity factors contributing to this problem.

2. Literature Review

2.1. Psychological and Economic Behaviour

According to the research letter by Pasko and Gupta, 2019, they have observed that obesity needs various approaches to improve people as it is complicated for nutritional elements. [1] When looking into the

psychological and economic behaviour that has much influence on how people are living in modern society, we can see how obesity becomes one of the major challenges amongst adults and youth. In this 21st century, one of the studies analyzed the perceptions of social support for weight loss amongst patients in primary care, it found that they experience support for weight loss efforts. [1]

This study verified almost 76% (n = 106) of patients who received support from their existing social network (e.g., family members, professionals); of which 59% had used apps and <20% had used social media for support services. [1] In some instances, the weight could be a bigger challenge on how to resolve it, especially if you have to seek assistance from the nearest primary health care services. Patients find it very challenging when they want to lose weight in their nearest primary services. The study by Pasko and Gupta confirmed that some of the patients who participated in their research with support between men and women and between support, sources will be useful for informing weight loss interventions in primary care.

2.2. Social Media and Obesity

In South Africa, the use of social media is becoming a norm for youth to google or search for information since the new way of finding out what is wrong with everyone

is only a touch of a computer or touch screen phone. Some of the patients from the research in adult patients from a Family Medicine clinic was directed to an electronic survey, they found that the majority of patients (57%) reported that their weight loss efforts were self-driven, versus supervised by a professional (e.g. Dietician; 25%), with 18% indicating a combination. [1] It may seem that the use of social media is an influence among South Africans but this is proven by these patients who use digital tools for support, though very few patients used social media for this purpose, and satisfaction with it was noticeably lower than satisfaction with support from apps or human support. [1]

One of the countries that are loudly spreading obesity and weight loss messages on the internet is American society. South Africans love America and especially celebrities who post online for weight loss. Mark's research which looked into Obesity in America stated that most of the people with obesity were due to inherited genetic makeup from their ancestors, hunters who ate rich diets in low-fat meats and grains for dinner. [2]

2.3. Lunch vs Obesity

In South African streets, people such as taxi drivers, most of the men as well as some of the women, love to eat out prepared food such as pap and meat or additional veggies during their lunch hour. This portion of the plate is normally very big and full. Some black male South Africans love eating out in informal places even though some of them wish to lose weight, but the prepared cooked food remains very delicious. People are very much aware that this kind of food will or might cause you to be obese but they cannot control themselves from that continued lunch that is waiting for them daily.

In my experience when you tell patients or people to exercise this becomes another big problem because they want magic or the simplest way to lose weight without taking too much effort.

Obesity is complicated in such a way that sometimes patients or people with this challenge are trying by all means to lose weight. This study mentioned above confirmed that patients who are on a diet don't stick with them, and to help them encourage patients to choose foods they like to eat within the context of varied, healthy choices; adherence will improve and so will success. [2]

2.4. Desire to Lose Weight

Firstly how do you tell someone that they should lose weight when they are more comfortable with how they look about themselves for many years?

Among participants aged 20 years and older with a body mass index (BMI) greater than or equal to 25, there were about 4509 overweight and obese the adult who participated 2060 adults who were overweight, 720 adults (weighted, 29.5%, 95% CI 27.3, 31.6) responded that they want to stay the same weight, and 1340 adults (weighted, 70.5%, 95% CI 68.4, 72.7) responded that they wanted to lose weight. [3] Unfortunately weight is not likely to be an optimal long-term solution for the improvement of cardio metabolic health to the participants. Weight gain and economic status.

It could be very confusing on how weight reductions may be among black and white racial groups with regards to affordability in terms of food and economic imbalance. It was unfortunate that a significant predictor of weight loss among white patients; and however, in black patients, was associated with a significantly reduced likelihood of weight loss. [4]

This means that when black patients are eating several servings of fruits and vegetables per day, they had increased odds of weight loss so which means that ability to afford healthy food in black population may not be a deciding factor for weight loss in black patients, and weight loss may instead be dependent on cultural factors in the black American population. [4]

• Weight loss and mobile apps

Technology is becoming one of the greatest impacts amongst obese people who are trying to decrease weight daily. In a study conducted on the Chinese population using a mobile application and wireless scale as a part of a commercially available weight loss program, a Digital Health Weight Loss Program surveyed up to 250,000 individuals. [5] The study confirmed that users weighing themselves more frequently achieved greater weight loss in a large population.

The majority of women and men are owning mobile phones and tablets which come with weight apps that assist people to deal with obesity.

One of the major challenges in abdominal obesity among people who have type 1 diabetes has been found having cardiovascular risk factors and complications. [6] A cross-sectional study by specialist diabetes physicians at a secondary care diabetes clinic revealed that gender plays a role in abdominal obesity and sometimes people find it difficult to achieve treatment. [6] The specialist recruited from a catchment population of 125,000 outpatients in Southern Sweden, 284 were found to be living with Type 1 diabetes. There was a significant association between abdominal obesity and both cardiovascular disease and cardiovascular risk factors among 284 patients with Type 1 diabetes. [6] Exercise and medication for obesity

In the news, social media and cell phone Apps people are pushing bariatric surgery as one of the quick solutions for obesity solution instead of following food or exercise. Therefore once patients have successfully lost weight after bariatric surgery sometime they forget that exercise should be taken to continue in their state of weight stability.

In South Africa, some of the people are comfortable on how they look especially when they are obese, and this becomes a challenge to tell someone to do exercises to reduce weight.

According to the study by Han et al, once patient realised that they have too much weight, they then avoid exercise and becomes less physical active. One of the common challenges among patients who did bariatric surgery is that the level of physical activity may be influenced by postoperative bariatric patients' internalized and experienced weight-related stigma via exercise avoidance. [7]

2.5. Obesity in the Village and Urban Africa

A total of 565 adults (18 years and above) 292 from rural and 272 from urban were recruited in one of the

African countries to determine body weight, obesity perception, and if people desire to lose a few kilograms. [8] It was found that a home-based childhood obesity prevention intervention may improve parent weight-related outcomes while also offering beneficial effects for the entire family.

Ghanaians like South African males and females who are living in rural areas may have similarities due to cultural upbringings and socio-economic development and religious beliefs. This cross-sectional study assessed the differences in perception of body weight among rural and urban Ghanaian adults in an urban Ahodwo and a rural Ejuratia community in the Ashanti region of Ghana.

It turned out that certain members of a family tend to have similar eating patterns and may therefore have similar BMI ranges also the challenge was that family members perceive that obesity might be a hereditary cause since their family members have similar weight. [8]

This situation is seen among males in South Africa, especially in the villages where they praise obese people as rich people. Sometimes people predict that when you see round obese woman, then you should know that the rest of the family is obese. In Ghana, family members are giving up to lose weight or to implement weight loss strategies because some of them are taking excessive food which also becomes another additional contributing factor [8]

Food intolerance among patients at Innlandet Hospital Trust, Gjøvik, Norway was found to be associated with total weight loss after 6 months following weight loss surgery for patients with obesity [BMI $\geq$ 40 kg/m² or BMI $\geq$ 35 kg/m². [9] Those patients had complications (e.g. diabetes, hypertension, sleep apnoea, musculoskeletal problems)] 6 months before the surgery's first visit at the hospital.

Weight loss is one of the most complicated things for patients or people who are experiencing it daily and they try by all means to leave a healthy lifestyle.

Kvehaugen and Farup found that there was a significant correlation between the change in dietary fat intake and change in bloating, and between the change in sugar intake and change in abdominal pain (the greater the reductions in these macronutrients, the greater the reduction in symptoms), as a result, sub-group of patients benefited from the dietary modifications. [9] Their study observed that constipation and satiety increased and food tolerance decreased 6 months after the bariatric surgery.

Childhood obesity is one of the challenges in the Middle East, and there is a need to look into chronic non-communicable diseases programs to prevent and control of obesity among preschool children, school children and adolescents, with more emphasis on promoting healthy eating, healthy lifestyle, and physical activity. [10]

In Ethiopia there were some of the food that had an impact on obesity increase, these include the frequency of consumption of sweet food and beverages, meat, and eggs, and these shows that consumption of sweets and calorie-dense animal source foods are important causes of weight gain. [11] The community of Southern Ethiopia in a community-based cross-sectional study was found to be at risk of weight gain due to numerous factors such as alcohol and sweet food intake.

The study showed that more than a quarter of adults in Hawassa City are either overweight or obese and one of

the things that may lead to weight gain is alcohol, those who are taking it are 2.5 times higher among adults who reported daily consumption as compared to those who did not take alcohol in the past month. [11]

The majority of the people who are obese in two urban and one rural community in the Greater Accra region showed an overall crude prevalence of obesity (BMI >30 kg/m²) of 20.2% and 4.6% for females and males, respectively. [12] It was evident that physical activity increases energy expenditure and also reduces the risk of heart disease more than that achieved by weight loss alone among the Ghanaian community. Community members should be reminded that it is important to do household chores as part of physical activities to reduce weight.

Weight among rural and urban Ghanaian adults was seen as a serious issue since they recommended that there is a need for public education, individual empowerment, frequent screening for overweight and obesity, the creation of supportive food environments, and an adaptation of a multifaceted approach and cultural-sensitive interventions as a means to control obesity. [13]

2.6. Obesity and Other Diseases

Musaiger study found that in Saudi Arabia, almost 6.9% of children aged 1-6 years were at borderline and 1.6% were at high risk of high blood cholesterol, and then followed by Tunisia, which found that the prevalence of hypercholesterolemia was 8.1% among adolescents aged 13-19 years. [14]

There are chronic diseases that arise as a result of nutritional imbalance and thus affect children as well as adults. In the Middle East countries, they have noted massive type-2 diabetes which is increasing at a higher rate among younger generation. [14] These countries have developed obesity program to focus on prevention and control of obesity among adults, unfortunately little attention is given to children. The sad disturbing findings were that obesity co-morbidities were reported among children and adolescents in the Middle East.

2.7. Bariatric SURGERY and Obesity

The health workers might want to assist the obese person before surveying and finding out what they can do before they are booked for bariatric surgery.

It is a shock on how patients or people who are experiencing obesity sometimes may see it in their own personal views. Certain patients once they realise that they have weight problems they distance themselves from exercise but find the solution to be bariatric surgery. Patients who had performed bariatric surgery should be advised to exercise more than before and not depend on the operation for miracles.

It is then essential to tackle the patient stigma and may help them to accept that they have a problem and they should exercise in order to have a healthy normal body.

The health workers might want to assist the obese person before surveying and finding out what they can do before they are booked for bariatric surgery. In some cases, once the patient realise her or his weight BMI level, the more likely she or he wanted to avoid exercise, and subsequently, the less physically active she or he was. [15]

2.8. African Perspective

In South Africa men especially the black majority from the villages' men who don't develop a big belly are considered to be poor or not having cash. This misconception spread in the townships and towns whereby a man is measured by weight if he is successful. We can also see weight among rural and urban Ghanaian adults in an urban (Ahodwo) and a rural (Ejuratia) community in the Ashanti Region of Ghana. The study conducted a total of 565 adults (18 years and above) 292 from rural and 272 from urban who were involved (gender: 113 males and 452 females). [16] Unfortunately according to the participants it is normal for Ghanaians to have up normal BMI because they think and feel that they are underweight. [16]

It is amazing how obesity may be something that could be a normal topic and considered to be a contributory factor for some of the women in Africa. Therefore in Ghana, it is not a shock to be obese; it is more like a lifestyle for every woman especially the elderly, females, and urban dwellers. This survey, which involved two urban and one rural community in the Greater Accra Region showed an overall crude prevalence of obesity (BMI >30 kg/m²) of 20.2% and 4.6% for females and males, respectively. [16]

Telling an African woman to lose weight might be a challenge because some of them appreciate their weight or shape as they are and don't see a need to change. Therefore weight therapists or advisors are trying to show the women all dangers of weight, especially during an increase in infectious diseases. In Ghanaian women, weight loss and maintenance strategies include dietary therapy, physical activity, lifestyle modification, behaviour therapy, pharmacotherapy, and occasionally surgery. [16]

To understand this issue further, the study revealed that among these women, physical activity increases energy expenditure and also reduces the risk of heart disease more than that achieved by weight loss alone.

2.9. Weight Gain and Economy

The big question in different sectors of the countries and their citizens is how the economy affects obesity. This seems to be a simple question but very complicated as we can sometimes wish that certain people may eat expensive food that the rich are affording.

One of the studies investigated this issue of economic imbalance among families and found that there was no strong association between low household income in childhood and later overweight/obesity, which may be due to this population living in a well-fare society, where a family may have a reasonable living despite a rather low income. [17]

In Africa, we find different kinds of shapes of women who are mostly appreciated by men especially when they are curvaceous and a little bit fat. Now, in Ethiopia, the study that looked deeper into the prevalence and associated factors of overweight/obesity among children and adolescents revealed that there are more overweight/obesity among children and adolescents. [18] Children and adolescents experienced obesity due to an emerging nutrition-linked problem. [18]

Countries are different in what contributes to their obesity, but Ethiopia had its contributory factors. This study also investigated the female gender of the children and revealed that the following are factors associated with obesity; high family socioeconomic status, learning in private school, physical inactivity, sweet nutrients preference, and less use of fruits/vegetables. [18]

Black Americans are more accepting of larger body sizes whilst those females were significantly more likely than males to report feeling unhappy when looking in the mirror or comparing their looks to those they see on television or in magazines. [4]

2.10. Weight Management

Sometimes when people are investigating obesity they look into the female gender of the children because in Africa sometimes male kids are ignored. Therefore it is necessary to also focus on the male child before they experience serious challenges because of obesity.

In one of the studies done among medical students, it was found that there is an association between obesity and clinical, Fang et al, found that anti-fat stigma is also existing. In addition, obesity is caused by factors outside a person's control was positively correlated with proficiency in obesity counselling skills. [19] There is a need to understand once a student may receive counselling from the University and utilize all the relevant resources may be obesity could be minimized.

2.11. Early Learning and Obesity

Once parents may try to understand that obesity may start at an early age, then children will start to follow their parents and avoid getting weight increase. In South Africa, there are early learning centers which should at least try to understand the impact of food that may contribute to obesity.

It was found that a home-based childhood obesity prevention intervention may improve parent weight-related outcomes while also offering beneficial effects for the entire family.

Teachers who know about early learning are the cornerstone to assist in tackling weight increase among children below the age of 4 years. This may only happen if parents of those schools are interested in their kids' weight challenges.

There are lots of implications that affect children in low socio-economic countries concerning fruit and vegetable eating. They are mostly controlled by who is in charge of their family's monthly grocery list and this becomes a big challenge.

It is then important to come up with some intervention strategies that focus on providing support for parents to understand and interpret their child's individual tendencies/innate eating behaviors. [20]

Obesity is something that we all should understand and appreciate and when parents fail to implement certain measures in their families, they will find themselves in the negative side of obesity and infectious diseases. Parents should strive by all means to implement the appropriate responsive feeding strategies, which are likely to be of

importance in reducing obesity development and/or in modifying obesogenic eating behaviors. [20]

3. Objectives

These are some of the issues this reading will be tackling to comprehend the issues of obesity.

- What are the key aspects that obese people are facing daily?
- What are the challenges that bring out an obese society?
- What are the major key issues that contribute to obesity daily?
- What are the various measures that could assist obese people in reducing weight loss?

4. Methodology

Obesity is a challenging topic and very complex, and in order to comprehend it, the researcher analysed various articles using secondary methodology and desktop articles. All the articles were researched using online google search to check every topic relating to obesity and weight loss management. The researcher used mix analysis methodology to give an overview of weight loss and how to treat patients with obesity or those who are experiencing stigma.

5. Conclusion

Weight management could be a very simpler thing once the recipients are good and accepting all the necessary steps offered by the nutritionist and the other health team. People having obesity problems are experiencing stressful situations about themselves and this is a secret that haunts them alone.

There are many ways that may assist parents in the fight against weight lost or decrease among the teenagers or children. In the process of teaching children against an increase in weight which may be a factor that may lead to other diseases in their adult stage, parents should take precautions when they feed or buy food in the stores. Adults across all racial groups should also realise that obesity could be resolved and is not just another unresolved issue. When people are determined to lose weight, they may rely on various mechanisms to be on the road to success without fear of not reducing their kilograms. The holistic nutritionist could play a major role to ensure that everyone who is not feeling good about their weight can now understand themselves much better. Adults across all racial groups should also realise that obesity could be resolved and is not just another unresolved issue.

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Competing Interests

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