

Prevalence of Obesity Among Housewives

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Abstract

Introduction: Obesity has emerged as the most prevalent serious public health problem. It is a complex disorder, which is a determinant to good health and well being. It is the most common nutritional disorder among the higher socio economic group in developing and developed countries. Obesity is becoming most prevalence health problem worldwide in most of the populations, affecting children, adolescents, adults and specially housewives or women. **Methodology:** A quantitative research approach and cross sectional descriptive survey was used. A total number of 60 samples were selected by the purposive sampling technique. The data was collected using structured questionnaires developed by the researcher. **Results:** The results found that out of 60 subjects, 24 (40%) had over weight level of obesity and in respect of their level of knowledge, 43(71.7%) of them were adequate level of knowledge. There was statistically ($p < 0.05$) significant association between the level of obesity with associative factors as sleeping hours in night time and performing exercise daily and highly significant ($p < 0.001$) with physical activity. There was statistically significant association between the level of obesity with demographic variables as educational status ($p < 0.05$), and highly significant ($p < 0.001$) with economic status and number of children. **Conclusion:** Obesity is one of the risk factors for the non communicable diseases. Creating awareness regarding the complications of obesity decreases the mortality due to non communicable diseases. Therefore the findings of the study revealed that the prevalence of obesity among housewives and increasing the level of knowledge among housewives regarding the obesity reduce the risk of complications of obesity.

Keywords: Prevalence; Obesity; Housewives.

Introduction

This has been a century of great revolution and change. In the 21st century, changes were noted not only in the science and technology but also in the life style of people. Changes in the life style made life easier and marked the beginning of certain chronic ailments such as obesity, cardiovascular disorders, endocrine disorders and osteoarthritis.¹

Obesity has emerged as the most prevalent serious public health problem.⁵ It is a complex disorder, which is a determinant to good health and well being. Obesity is the most prevalent nutritional disorder in prosperous communities and is the result of an incorrect energy balance leading to an increased storage of energy, mainly as fat. It is the most common nutritional disorder among the higher socio economic group in developing and



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developed countries. Obesity is becoming most prevalence health problem worldwide in most of the populations, affecting children, adolescents, adults and specially housewives or women.³

Statement of The Problem

A study to assess the prevalence of obesity among housewives in selected areas at Puducherry.

Objectives

- To assess the prevalence of obesity among housewives.
- To assess the associative factors related to obesity.
- To find out the association between the prevalence of obesity among housewives with selected demographic variables.

Methodology

A quantitative research design was used for this study. A cross sectional descriptive survey was used and 60 samples were selected by using simple random sampling technique. The data was collected using structured questionnaires developed by the researcher.

Results and Discussion

Table 1: Frequency and percentage wise distribution of selected demographic variables among housewives. (N=60)

SL. No	Demographic Variables	Frequency (N)	Percentage (%)
1	Age		
	<20 years	22	36.7
	21-30 years	16	26.7
	31-40 years	22	36.6
	41-50 years	0	0
2	Religion		
	Hindu	56	93.4
	Christian	2	3.3
	Muslim	2	3.3
3	Type of family		
	Nuclear	40	66.7
	Joint	20	33.3
4	Educational status		
	Illiterate	8	13.3
	Primary	18	30
	Secondary	23	38.3
	Degree	11	18.4

SL. No	Demographic Variables	Frequency (N)	Percentage (%)
5	Economic status		
	Lower	4	6.7
	Lower middle	37	61.7
	Upper middle	19	31.6
	Upper	0	0
6	No of children		
	Nil	2	3.3
	1 or 2	49	81.7
	3 and above	9	15

Table 1 the demographic data revealed that majority of them 22(36.7%) belongs to age group of <20 years, 56(93.3%) were Hindus, 40(66.7%) belongs to nuclear family, 23(38.3%) were completed secondary level education and 37(61.7%) belongs to lower middle class family.

Table 2: Frequency and percentage wise distribution of selected associative factors among housewives. (N=60)

Sl. No	Variables	Frequency (N)	Percentage (%)
1	Sleeping hours in night time		
	<8 hours	39	65
	>8 hours	21	35
2	Post lunch sleeping		
	<1 hour	47	78.3
	>1 hour	13	21.7
3	Watching Tv		
	<2 hours	33	55
	>2 hours	27	45
4	Physical activity		
	High	16	26.7
	Moderate	43	71.7
	Low	1	1.6
5	Performing exercise daily		
	Yes	2	3.3
	No	58	96.7

Table 2 showed that out of 60 subjects 39 (65%) of the subjects were sleeping <8 hours per day. 47 (78.3%) of them had the habit of post lunch sleeping <1 hour per day and 33 (55%) of them were had watching TV <2 hours per day. 43(71.7%) of them were had moderate physical activity and 58 (96.7%) comes under not practice any exercise.

Table 3: Frequency and percentage wise distribution of the prevalence of obesity among housewives. (N=60)

Level of Obesity	Frequency (N)	Percentage (%)	Mean	Standard Deviation
Underweight	0	0		
Normal Weight	23	38.3		
Overweight	24	40	2.83	0.763
Class 1 Obesity	13	21.7		
Class 2 Obesity	0	0		
Class 3 Obesity	0	0		

Table 3 showed that 24 (40%) of the housewives had over weight, 23 (38.3%) had normal weight and 13 (21.7%) had class 1 obesity level. The mean value of the assessment of the prevalence of obesity among housewives is 2.83 and standard deviation is .0763.

Table 4: Frequency and percentage wise distribution of the level of knowledge regarding obesity among housewives at lawspet, Puducherry. (N=60)

Level of Knowledge Regarding Obesity	Frequency (N)	Percentage (%)	Mean	Standard Deviation
Inadequate	0	0		
Moderate Adequate	17	28.3	2.716	0.454
Adequate	43	71.7		

Table 4 showed that out of 60 students, majority of the housewives had adequate level of knowledge regarding obesity 43(71.7%), 17 (28.3%) had moderately adequate level of knowledge and none of the number of the housewives had inadequate level of knowledge regarding obesity 0(0%).

The mean value of the assessment of the knowledge regarding obesity among housewives at lawspet is 2.716 and standard deviation is .0454.

Table 4 showed that the association between the prevalence of obesity among housewives with their demographic variables. There was statistically significant association between the prevalence of obesity with educational status ($p < 0.05$), and highly significant ($p < 0.001$) association between the prevalence of obesity with economic status and number of children.

Table 5: showed the association between the prevalence of obesity among the housewives with their associative factors. There was statistically ($p < 0.05$) significant association between the level of obesity with associative factors as sleeping hours in night time and performing exercise daily and statistically highly significant ($p < 0.001$) with physical activity.

Table 4: Association between the prevalence of obesity among housewives with their demographic variables. (N=60)

Sl. No	Demographic Variables	Level of Obesity						χ^2	Df	P-Value
		Normal Weight		Over Weight		Class 1 Obesity				
		N	%	N	%	N	%			
1	Age									
	<20 years	11	50	6	27.3	5	22.7	6.03	4	.197
	21-30 years	6	37.5	5	31.2	5	31.2			
	31-40 years	6	27.3	13	59.1	3	13.6			
	41-50 years	0	0	0	0	0	0			
2	Religion							3.71	4	.446
	Hindu	22	39.3	21	37.5	13	23.2			
	Christian	0	0	2	100	0	0			
	Muslim	1	50	1	50	0	0			
3	Type of family							1.86	2	.393
	Nuclear	13	32.5	17	42.5	10	25			
	Joint	10	50	7	35	3	15			
4	Educational status							15.8	4	.006* (S)
	Illiterate	5	62.5	3	37.5	0	0			
	Primary	7	38.9	6	33.3	5	27.8			
	Secondary	5	21.7	11	47.8	7	30.4			
	Degree	6	54.5	4	36.4	1	9.1			
5	Economic status							23.0	4	.001** (S)
	Lower	4	100	0	0	0	0			
	Lower middle	16	43.2	9	24.3	12	32.4			
	Upper middle	3	15.8	15	78.9	1	5.3			
	Upper	0	0	0	0	0	0			
6	No of children							20.0	4	.001** (S)
	Nil	0	0	2	100	0	0			
	1 or 2	23	46.9	13	26.5	13	26.5			
	3 and above	0	0	9	100	0	0			

*- $p < 0.05$, significant and **- $p < 0.001$, highly significant.

Table 5: Association between the level of obesity of the subjects with their associative factors. (N=60)

Sl. No	Associative Factors	Level of Obesity						X ²	Df	P-Value
		Normal Weight		Over Weight		Class 1 Obesity				
		N	%	%	%	N	%			
1	Post lunch sleeping							2.54	2	.280
	<1 hour	16	34	19	40.4	12	25.5			
	>1 hour	7	53.8	5	38.5	1	7.7			
2	Sleeping hours in night time							7.93	2	.001* (S)
	<8 hours	10	25.6	18	46.2	11	28.2			
	>8 hours	13	61.9	6	28.6	2	9.5			
3	Watching Tv							1.36	2	.507
	<2 hours	14	42.4	11	33.3	8	24.2			
	>2 hours	9	33.3	13	48.1	5	18.5			
4	Physical activity							29.5	4	.000** (S)
	High	15	93.8	1	6.2	0	0			
	Moderate	8	18.6	22	51.2	13	30.2			
	Low	0	0	1	100	0	0			
5	Performing exercise daily							22.2	4	.005* (S)
	Yes	2	100	0	0	0	0			
	No	21	36.2	24	41.4	13	22.4			

*-p<0.05, significant and **-p<0.001, highly significant

Major findings of the study.

- 24 (40%) housewives had over weight level of obesity.
- 43(71.7%) housewives had adequate level of knowledge regarding obesity.
- There was statistically significant association between the level of obesity with demographic variables as educational status (p< 0.05),and highly significant(p< 0.001) with economic status and number of children.
- There was statistically (p< 0.05) significant association between the level of obesity with associative factors as sleeping hours in night time and performing exercise daily and statistically highly significant (p< 0.001)with physical activity.

Conclusion

A descriptive research design is selected for this study to assess the prevalence of obesity among housewives at selected areas, Pondicherry. The findings of the study revealed that prevalence of obesity among housewives were common and found inadequate level of knowledge on complications of obesity. As a community health

nurse plays vital role in creating awareness about the complications of obesity.

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