

**EDU WORLD 2022****Edu World International Conference Education Facing Contemporary World Issues****PERCEPTION OF OBESITY: A QUALITATIVE STUDY**

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**Abstract**

Obesity and overweight are one of the greatest challenges of our century. World Health Organization worldwide statistics show an increasing prevalence of adult obesity. In the present study, we aimed to gather perceptions on the obesity of overweight or obese adults that would allow a comprehensive picture of their life experience and the impact of socio-cultural factors on them. The study involved 19 people, 12 women and 7 men, aged between 26 and 50 years ( $M = 35.84$ ;  $SD = 8.89$ ) with a Body Mass Index (BMI)  $\geq 28$  kg / m<sup>2</sup>, degree I or II of obesity or who have experienced an episode of obesity by the time the study is conducted. The study was carried out in two stages: the first stage consisted of a qualitative focus-type approach, and the second stage consisted of a face-to-face interview with each participant. The results of the interviews allowed the identification of two major topics of interest, interconnected, namely the self-perception of obesity and the emotional response to stigma. The obtained results are discussed based on the specialized literature. The abstract should be presented as a single paragraph and briefly summarize the goals, methods, and new results presented in the manuscript. Reference citations are not allowed.

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*Keywords:* Focus group, obesity, perceptions, stigma

## 1. Introduction

Defined by a body mass index (BMI) of more than 30 kg / m<sup>2</sup>, obesity now significantly affects more than 300 million adults worldwide. In addition, approximately 1.9 billion people have excess body mass (are overweight) (WHO, 2016). The negative health implications of obesity are well documented, with most studies showing that the risks of chronic illness and mortality increase as the body mass index (BMI) increases (Koch, 2011; Yan et al., 2006, as cited in Carr & Jaffe, 2012). Given that in most Western and industrialized cultures people see body fat as unhealthy and ugly, the psychosocial consequences of obesity are inevitable. In this regard, there are numerous studies in the specialized literature that highlight how cultural and psychosocial factors, accompanied by prejudice and social stereotypes, affect the self-esteem and self-image of obese people (Klaczynski et al., 2003; Krayner et al., 2007).

Obesity is associated with stress and anxiety (Petry et al., 2008; Simon et al., 2006), various mental disorders (depression, mania, panic attack) and suicide (Mather et al., 2009). Also, a series of researches focused on the theory of stigmatization of obesity revealed a number of pervasive factors in the lives of obese people: poverty of social relationships, social isolation, poor access to education, health and work or employment opportunities, impaired mental health, self-esteem, body image (Biedert & Margraf, 2004; Puhl et al., 2008).

However, there is a limited number of researches that qualitatively explore individuals' perceptions of the impact of obesity on their self-image, body image, or coping strategies developed by them, which limits their true understanding of what it means to be "fat" or "to live this experience" (Thomas et al., 2008).

## 2. Problem Statement

The vast majority of studies on the negative effects of obesity and overweight on individuals were based on questioning of representative samples. The questionnaires have the advantages of psychometry; however, they are developed by experts based on scientific data provided by the literature and less on the collection of perceptions.

## 3. Research Questions

Overweight and obesity are complex conditions of multifactorial origin, resulting from the interaction of heterogeneous factors that derive from an individual's eating pattern, low physical activity and determinants of energy expenditure (Blüher, 2019). In this sense, we ask ourselves: Can a comprehensive picture of the life experience of obese people and the impact of socio-cultural factors on them be outlined?

## 4. Purpose of the Study

The present study aims to collect and qualitatively analyse the perceptions of the target population regarding self-body image, how their emotions and feelings are influenced by these aspects, the impact of

socio-cultural factors and developed coping strategies. In this sense, the objectives of the study were: to establish the criteria for inclusion and exclusion of participants, according to the general objective of the study; determining the sample size and sampling techniques; a priori analysis; establishing working methods and techniques, flexible and adapted to the objective of the study; establishing focus topics for the focus group; developing open-ended questions to expand the exploration of personal experience.

## 5. Research Methods

Given the objective of the study, the selected research method is the grounded theory developed by sociologists Glaser and Strauss in 1967 (Glaser & Strauss, 2006).

The grounded theory method assumes that the researcher studies different cases as indivisible integers, in which the variables interact in a unitary way to produce certain answers (Cucu-Ciuhan, 2017).

The present study was conducted in two phases:

1. The first phase consisted of the qualitative focus-group approach that allows the identification of topics of interest to the subjects.

2. The second phase of the study consisted of a face-to-face interview with each participant. Face-to-face interviews are intended to provide additional and complementary data for the study topic

The participants in this study are 19 adults, aged between 26 and 50 years ( $M = 35.84$ ;  $SD = 8.89$ ). The participants in the study are 12 women (63.2%) and 7 men (36.8%), with a Body Mass Index (BMI)  $\geq 28$  kg / m<sup>2</sup>, grade I or II obesity or who have experienced an episode of obesity until the time of the study, they can walk alone for at least 10 m, do not take antidepressant medication or any other type of medication that could affect weight, do not suffer from mental disorders (psychosis), do not abuse alcohol or drugs and have not been diagnosed with bulimia nervosa. The sampling strategy is guided by the literature on the characteristics of obese people (they have different weights, they want or do not want to lose weight, they have followed a diet and have relapsed or they face other related problems, they want to lead a healthy life or have given up). In this regard, in order to obtain a representative sample, the sampling of convenience, rational and theoretical sampling, associated with the design of the research was used.

For the focus-group interview, the participants were divided into three groups. Homogeneity of groups is ensured by the selection criteria of the participants, weight being one of the important aspects. Focus groups were held for a month, one afternoon a week. The aim was to balance the discussions, to involve the subjects equally in these discussions and to organize the group. At the beginning of each session, the author described the purpose of the study. Socio-demographic data and informed consent were collected. To avoid bias, the aim of the study is described in terms of "opinions" and "perceptions" on obesity in Romania. Consistent with the focus group methodology proposed by Morgan (1998) for collecting subjective perceptions of obesity, open exploration has been combined with the answer to some predetermined questions, which gives the semi-structured nature of the focus group. The questions were: "When a person is considered overweight or obese?", "How are obese people perceived in society?", "What problems do you face as obese people?" "How does weight affect your life?" "What coping strategies do you adopt?"

The face-to-face interview with each study participant, conducted after the focus group, allows investigators to deepen the topics of discussion (History of obesity: "How do you see yourself?", "How do you describe your own body?", "What makes you describe yourself like this?"; "What coping strategies do you adopt?"). The inductive and heuristic approach allows participants to address the issues that matter most to them, as well as to capture the non-verbal discourse. The interview lasted between 60-90 minutes.

The contents of the discussions were transcribed and the topics were extracted. The analysis of the obtained data was done in accordance with the method of grounded theory: transcription of topics was read and reread to understand their meaning (similarities and differences), identification and coding of categories, sorting data to ensure that theories / concepts are common, noting differences. The coding of the results is done manually to allow more accurate interpretation of the data.

## **6. Findings**

Two major, interconnected themes were identified.

### **6.1. Self-perception of obesity**

The subjects considered it important to "look the reality in the face", leading to appropriate decisions about their own health. However, they acknowledge that they feel uncomfortable defining themselves in this way; ("If I see myself as obese, I don't even want to imagine what others think of me", "When I was diagnosed, I was horrified: I considered myself rather plump, which didn't bother me much.", "I'm obese, it's obvious"). Although the definition of obesity in all focus groups was based on BMI values, there were also subjects who denied the scientific value of the weight index ("It's more like the way you feel, and I don't feel obese", "I'm fuller, but I'm pretty"; "It depends on who I'm talking to: I'm normal for some people, I'm fat for others"; "In my family, we are all bigger, it's a family trait"; "I don't consider myself obese, there are others who are much fatter, look at other peoples"). In the specialized literature, most studies that have addressed the issue of obesity and overweight have examined the correlations between self-identification or non-identification as an obese or overweight person, with few studies specifically examining self-identification of obesity (Robinson et al., 2020). It has also been suggested that few people admit to being obese. Robinson et al. (2020) suggest that the effects of weight on health are sometimes inconsistent due to the fact that many people do not identify as obese or overweight.

Either way, the definition of obesity is subjective. The fact that most participants defined themselves as obese or at least overweight has positive implications for health and care decisions. Similar results were obtained by Sikorski et al. (2012). In their study, all participants focused on the aesthetics of body proportion and appearance as the main definition of overweight, sympathy, and occupation and clothing style being seen as influencing factors (Sikorski et al., 2012). Failure to identify as obese or overweight, despite medical evidence or body mass index, is also one of the results discussed in the literature. For example, a study conducted in the UK in 2012 showed that less than 10% of obese people defined themselves as being obese (Robinson et al., 2020). In addition, self-identification as an

overweight or obese person takes into account a milder perception of oneself (Taylor et al., 2006). Discussions on self-perception of overweight and obesity also included the identification of the causes. There was no consensus on the causes of obesity, with subjects identifying both internal and external factors. The following factors were mentioned: psychological stress ("Life is hard nowadays"; "I have a hard time coping with all the problems"; "I don't have time to take care of myself, I have to take care of my family"), genetic aspects ("Both my mother and grandmother were fat, I inherit them"; "bad genes"), food choices ("I admit I like to eat, I can't help it"; "I nibble on something all day"; "there are so many offers"; "I eat a lot of fast food, I'm almost addicted"). Lack of physical activity or influences from the external environment, such as a group of friends or food advertisements, have been cited as external factors. It was noted that both internal and external factors were invoked in equal measure.

## **6.2. The emotional response**

The second major identified theme was how others view them and the emotional response of the subjects. Most of the subjects admitted that they had experienced at least one episode in which they were offended or blamed for their body weight. They said they knew that society considered them "stupid" or "disinterested and lazy", "stupid" or "stinking and smelly". They also unanimously acknowledged that excessive adiposity leads to excess body fluids that carry certain odors, but none of them end up in that desperate situation that makes them addicted to care ("I didn't end up like the ones I see on TV"; "I wash often because I sweat excessively"; "I always make sure I'm clean" etc.). However, they are disturbed by the way they are viewed or by the fact that they are bypassed on the street or in shops ("The bigger I get, the smaller I feel"). Of course, image and self-esteem suffer. Ladies, in particular, compensate for this by choosing clothes that are as sober as possible, that do not make them stand out, or choose loose clothing that masks the body as much as possible. In general, most subjects stated that they avoid going out and socializing, although they consider themselves "the soul of the party when they go out with friends." There is a certain self-stigmatization, the subjects attributing their negative stereotypes. Self-stigmatization correlates the negative attributes of stigma and internalizes them as positive (Phelan et al., 2008). The stigma of high body weight in the Western world is intensely debated in the specialized literature. Overweight is seen by many as a sign of personal failure, and obese people are described as lacking in self-control and with limited intellect (Puhl & Heuer, 2009). These negative stereotypes attributed to excessive body weight seem to be widely supported, with many studies showing both implicit and explicit negative attitudes towards people with higher body weight, either among the general public or health professionals (Schwartz et al., 2003; Tomiyama et al., 2014). The widespread stigma of overweight and obesity has negative consequences for people who identify as overweight. These people acknowledge that they have a personal characteristic that is stigmatized by others, and this recognition can negatively affect their physical and mental health (Robinson et al., 2020).

## **7. Conclusions**

Although each experience of obese people is unique, in the present study two common topics of interest were identified that can outline a detailed picture of the lives of these people. Research

contributes to the development of an understanding of obesity and how it impacts the lives of those who experience it.

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