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## Obesity's Influence on the Psychosocial Well-Being of Primary School Students in Kota Kinabalu: A Phenomenological Approach

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### Abstract

Overweight and obesity among youngsters have grown quickly worldwide in recent decades, including in Malaysia. The major goals of this study are to investigate the psychological impacts that obesity has on children and to find out the quality of life of obese children. A qualitative study design and a phenomenological approach are used in this study. The study used a purposive sampling method. A sample was selected of five obese male and female students aged 11 and 12 years. The selected students attend a government primary school in the city of Kota Kinabalu, Sabah, Malaysia. The data collection process was done using the methods of interviews, observations, and document analysis. Based on the findings of the study, there are three emerging themes that explain the psychological effects experienced by primary school students that impact their quality of life. These include: (a) social health, (b) mental health, and (c) physical health complications. In conclusion, this study found that obesity causes an enormous number of psychosocial problems with regard to the personal and social lives of children. Second, this research informed parents about the prevalence of bullying in the home, perpetrated by siblings. Finally, these findings contribute to the growing body of research revealing the harmful effects of weight-related stigma, even at a young age, and may be valuable in modifying public policy about weight discrimination.

**Keywords:** Obesity, Psychosocial Well-Being, Children, Adolescents, Phenomenological Approach

### Introduction

Overweight and obesity in adolescents have become major public health concerns worldwide since their prevalence has increased substantially over recent decades (Lobstein et al., 2015), especially in the developing world (Misra & Bhardwaj, 2014). According to the World Health Organization (2018), over 340 million children and adolescents aged 5–19 years old were obese or overweight in 2016. Malaysia is a developing Asian country that is experiencing a rapidly rising prevalence of childhood obesity, consistent with international trends (de Onis

et al., 2010). The National Health and Morbidity Survey (NHMS) 2019 study showed that about 29.8 percent of children aged 5 to 17 in Malaysia are overweight and 14.8 percent of those are obese (National Health and Morbidity Survey (NHMS) 2019, 2019). Several studies have shown that children who are obese are at a high risk of experiencing psychosocial effects.

A recent study by Juvonen et al (2017) examined children who are obese or overweight and found they are at high risk of experiencing psychosocial effects, including low quality of life and high feelings of shame. Other studies show that children with weight problems and obesity are often the victims of bullying (Pengpid & Peltzer, 2019). Gam et al (2020) discovered in their study that students with BMIs over the usual range are constantly subjected to body shaming. Shame is a very severe, intense, upsetting, and sometimes depressing feeling when internalised (Sjöberg et al., 2005). Thus, this proves that the problem of obesity and being overweight is a serious issue that needs the attention of many parties to prevent mental health problems in early childhood. This is because, according to a survey conducted by NHMS in 2019, about 424,000 children were found to have mental health problems in Malaysia (National Health and Morbidity Survey (NHMS) 2019, 2019). The same study showed 9.5 percent of the total were children aged 12–15 years old. The study also found that 42 percent of the problems they faced were mostly due to peer problems.

Meanwhile, the National Health and Morbidity Survey (NHMS) 2017 states that 2 out of 5, or 46.8 percent, of children in Sabah suffer from anxiety, which is the highest number in Malaysia. The study also found that one in five children, or 21.9 percent, suffers from depression. This number shows that children with depression in Sabah are the second highest in Malaysia after Selangor. Statistics also show that about 1 in 10 children in Sabah, or 12.3 percent, suffer from stress. Again, this number is the second highest in Malaysia after Selangor (Institute for Public Health (IPH), 2017). Thus, the purpose of this study is to investigate the problem of obesity and the psychological impact it has on primary school pupils in Kota Kinabalu.

## **Method**

### **Research Design**

In this study, a qualitative investigation employing a phenomenological method was used. Researchers who use phenomenological methods seek to "enter" the world of conception of the individual being investigated to enable them to understand how and what definitions are constructed of events that occur on a daily basis (Geertz, 1973). Bengtsson (2016) found that the phenomenological method contributes to an understanding of the human condition in different contexts and of a perceived situation. The phenomenon to be researched in the framework of this study is the psychological impact on primary school pupils under the age of 12 in urban settings who suffer from obesity or weight disorders. According to Idris (2010), phenomenological researchers will look at the essence of the child's experience according to the child's own understanding and feelings. This method of phenomenological research is also extremely appropriate for this study since the objective of this study is to analyse a person's or a group of people's "life experience" in connection to a concept or phenomenological research (Creswell, 2007).

**Participants**

In this study, the researcher also selects hypothetical samples or samples so that the sample really meets the criteria, properties, and contains information as required in the study. According to Merriam (2001), purposefully selecting research participants is extremely helpful since they may supply information until there is no more fresh information or the information overlaps. Thus, the researcher chose as the study sample male and female elementary school pupils aged 12 and under who are overweight or obese. The selected sample consisted of five people, consisting of two female students and three male students. Researchers sought written permission from students' parents before agreeing to allow their children to be study participants. To guarantee that their anonymity is totally protected, all names are provided as pseudonyms. They were informed that they might leave the research at any moment without repercussions.

**Procedure**

A total of five interviews were conducted with year 5 and year 6 students. Face-to-face semi-structured interviews were undertaken. When interviewing children, researchers utilise basic language to avoid making the interview process too formal and creating a less comfortable environment for the informants. According to Idris (2010), researchers should use language that is "casual," as if chatting with a friend, because respondents often feel uncomfortable using language in an "orderly" manner. Data collection and analysis were carried out concurrently. Data collection continues until no new concerns are discovered. Informants will be interviewed individually by the researcher during recess time and at the end of school hours. Parents will be notified if on that day their child is involved in the interview. Researchers are allowed to use one of the special rooms in the school to interview students. Interviews lasted 30–45 minutes and were audio recorded and transcribed verbatim.

At the beginning of the data collection process, the data was compiled and translated into the form of transcripts. Then, the transcripts are analysed to form the code. The codes will then be grouped into appropriate categories according to the similarity of their characteristics. The following step is to group the categories into thematic clusters based on the similarity criteria of the newly formed categories. The themes that emerge are guided by the themes that emerged from previous studies. The final process is reporting based on the themes that arise to answer the research questions. Overall, the data analysis procedure in this study is guided by the Stake (2010) procedure as shown in the flow chart.

## Data Analysis

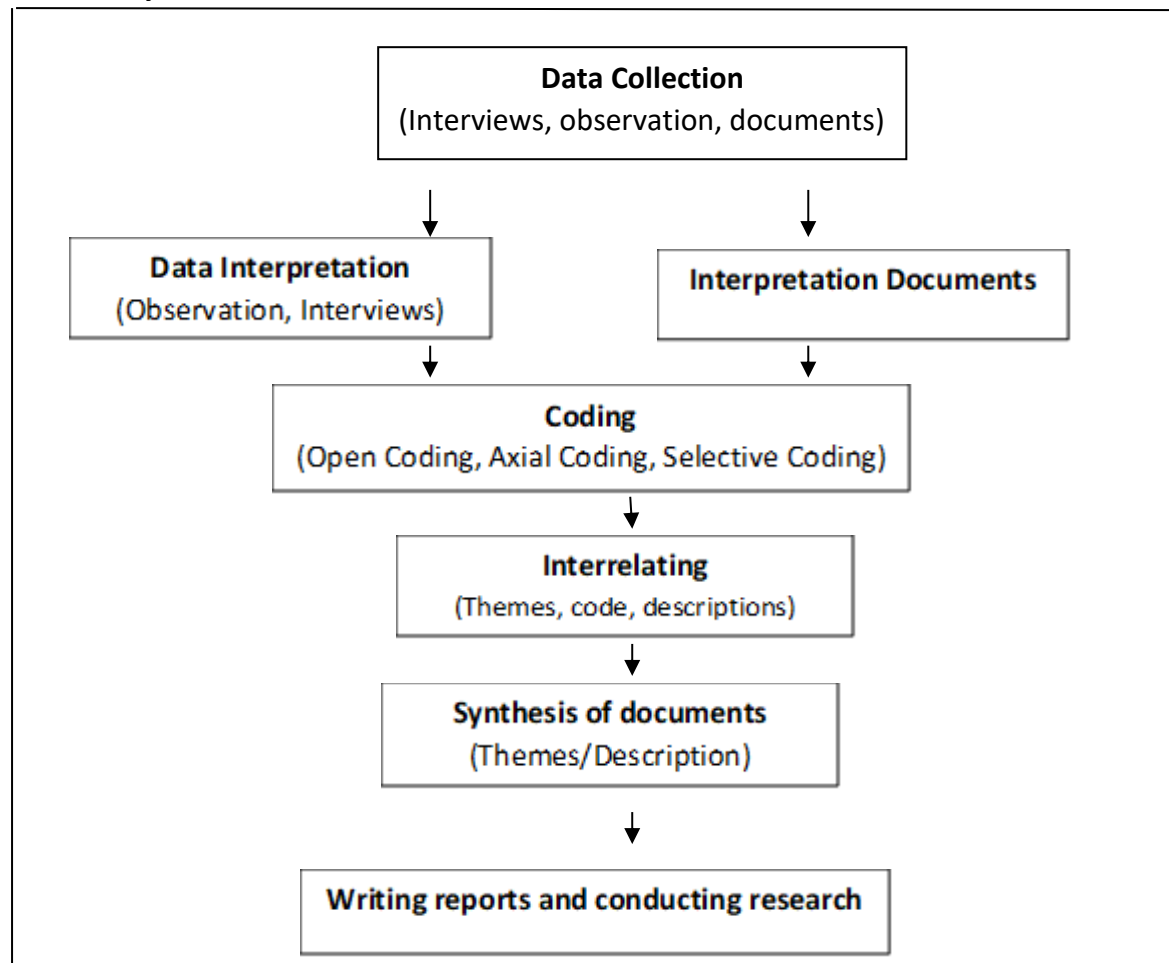


Figure 1. The flow chart shows the procedure for qualitative data analysis. (Stake, 2010)

## Findings

During the research, three major topics emerged: the theme of social health, the theme of mental health, and the theme of medical consequences. These three themes are the result of a collection of elements that are grouped into appropriate categories to answer the objectives and questions of the study. The chart below shows the three themes that emerged in this study.

**Table 1. Key themes in this Study**

Themes	Conceptual codes
Social Health	Bullying and teasing
	Stigma
	Marginalization
	Physical assault
	Strained relation with siblings
Mental Health	Negative body image
	Low self esteem
	Depression
	Anxiety
	Stress
Physical Health Complications	Unfit physically
	Tired easily
	Pulmonary (Asthma)

**Social Health**

This study shows that obese and overweight children have psychological consequences that must be addressed. All five informants had experiences of being bullied and teased because of their obese body shapes. The experience of bullying does not only come from peers and classmates. In fact, it is very sad when the problem of bullying is also done by family members, such as siblings, cousins, and other family members. Bullying was done not only by ridiculing the forms of names, associating them with certain animals, or hiding personal belongings, but also by physically abusing them, according to the study. According to the statement of one of the informants,

“..... but my brother is the most violent. He once hit my head... My sister always follows my brother in making fun of me being fat, and my sister likes to be grumpy.” (*Nick*)

Typically, this physical bullying is perpetrated by their own siblings. There were informants who said that the usual physical limbs to be punched, pinched, pushed, and poked were the arms and head. Most obese children who experience physical bullying are male students. While female students are always a nuisance in terms of body shape and body shaming, a female informant said that her body had been pushed to the classroom door. For example, “He made fun of me... he referred to me as fat..! fat..! fat..! he appeared to want to bully me...I was standing near the door when he pushed me through it!” (*Anne*)

**Mental Health**

The study also discovered that these obese or overweight children have mental health issues that impact their quality of life. The informants stated that they faced problems with lack of confidence, negative body image, depression, anxiety, and stress. However, their levels of depression, stress, anxiety, and sadness are different because it depends on their experiences. As a result, one of the informants, who is very sad, frustrated, stressed, anxious, and depressed as a result of his daily experiences, says he is considering suicide.

“I thought I wanted to commit suicide... I want to try to fight, but I can't... I always want to try to fight. I want to retaliate... It's like I've fought two times in year 5...But my brother hit my head very hard and it hurts. ” (*Nike*)



Studies have also found that obese children who experience bullying at home will vent their anger in a variety of ways, such as damaging their own belongings. There were informants who damaged the belongings of the brother who bullied them. This act seems to vent their anger and dissatisfaction towards the act of bullying, but they are powerless to retaliate for the act. There was an informant who released feelings of stress, depression, and sadness in the toilet by crying, spilling water, or kicking items that were in the toilet or bathroom. Female informants were more likely to remain alone in the room and cry, but male informants were more aggressive in expressing their sadness. The study also discovered that these obese children have feelings of fear and anxiety, especially if they see or are with people who often bully them. This dread stems from the fear of being bullied, particularly being beaten. The female informants, on the other hand, were uneasy because they were afraid of being embarrassed by taunts about their physical appearance.

### **Physical Health Complications**

The issue of the influence of health problems experienced by obese children on their quality of life was also discovered in the study. These obese children are less fond of fitness activities during physical education classes. For example, they do not like running activities because they feel tired and sore in the legs and calves. They prefer to play activities such as badminton during physical education classes. If playing ball, they will choose the position of the goalkeeper to avoid running. According to the statement of one of the informants,

"My legs are tired... I feel my legs hurt... I don't like running... I'm not comfortable." (*Andy*)

There are informants who do not like to play ball because they always do not have a chance to get the ball. Due to their large body size, they find it difficult to compete with other more active children running to get the ball. This causes them to have no interest in being a player and just want to play in the goalkeeper position because they don't have to run much. For example,

"If I play football and do not be a goalkeeper, it's hard to manage. I always miss the ball... " (*Rey*)

These fat youngsters dislike physical fitness activities since they do not feel comfortable and are unable to perform adequately. This is due to their large body size, which makes it difficult for them to do exercises such as push-ups or leap.

"I don't like push-ups either... I feel like my body is heavy... I can only do push-ups about 5 times." (*Andy*)

The research also discovered that some of the participants had asthma. Obese children's asthma worsens their health, especially if they seek to engage in vigorous activities like running. They will become weary and stuffy very rapidly. This has an impact on their willingness to participate in usual childhood activities.

### **Discussion**

The study's findings reveal that childhood obesity has severe consequences not just in terms of health but also in terms of psychological factors. Obesity causes these youngsters to have interpersonal issues, which can lead to depression. Furthermore, interpersonal issues are one of the leading causes of depressive symptoms in children. This is a significant result for parents, teachers, and researchers because previous research has shown that interpersonal issues can be a predictor of depression in young girls and boys (Rudolph et al., 2014). Bullying among fat pupils has a harmful effect on these youngsters. This study demonstrates that

bullying, both verbal and physical, happens among obese youngsters. Moreover, researchers have identified that overweight adolescents are more likely to experience interpersonal problems because of exposure to verbal abuse and a lack of support from peers (Ames & Leadbeater, 2017).

The study also found that these obese children were victims of teasing or bullying by friends at school and home, especially siblings. This was consistent with the findings of previous research. Previous research found that youth were frequently teased and bullied because of the people with whom they were associated, including friends (74%), dating partners (65%), and family members (32%), according to Puhl et al (2013). This mocking can have an emotional impact over time, making children feel lonely, ashamed, and unhappy. Even more worrying is when there are children who are victims of this family bullying who have the idea of committing suicide. According to previous research, 50 percent of obese adolescent girls who face ridicule from family members and peers have suicidal thoughts (Neumark-Sztainer et al., 2002). Thus, the problem of bullying and ridiculing in the family, particularly among siblings, cannot be dismissed as trivial. Bullying among family members with weight problems should be addressed by parents and other family members.

Children's self-esteem suffers as a result of the obesity epidemic. Obese children are greatly affected by the negative stigma associated with weight disorders, as well as body shaming. Previous research found that obesity has been described as being "one of the most stigmatising and least socially acceptable conditions in childhood" (Schwimmer et al., 2003). According to the findings of this study, they also confront a slew of other challenges, such as unfavourable stereotypes, discrimination, and social marginalization. This study is similar to previous studies that found obese children also face numerous other hardships, including negative stereotypes, discrimination, and social marginalisation (American Academy of Pediatrics, 2006). The study also discovered that these obese youngsters became tired fast and were frequently sluggish in finishing group events owing to shortness of breath. Niehoff (2009) identified overweight children as sometimes finding it difficult to participate in physical activities because they are slower than their classmates and suffer from shortness of breath. These negative social issues lead to children's and adolescents' poor self-esteem and lack of self-confidence.

## **Conclusion**

In conclusion, this study found that obesity causes an enormous number of psychosocial problems with regard to the personal and social lives of children. This study provided parents with awareness of the occurrence of bullying in the home committed by siblings. In fact, some parents make negative comments about a child's weight without realising that it hurts the child's feelings. If this is happening, parents must intervene. Hold a family talk about it and establish some reasonable ground rules for treating one another in more helpful and positive ways. In addition, this information could be used in the development of school-based training programmes aimed at increasing awareness among staff of the complexity of obesity, including teasing and impaired psychological well-being. Finally, these findings add to the expanding body of research indicating the negative impacts of weight-related stigma, even at a young age, and may be useful in changing public policy surrounding weight discrimination.

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