

# Obesity critical analysis – ibm and obese people

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A person with a BMI of 30 or more is generally considered obese. A person with a BMI equal to or more than 25 is considered overweight. Based on the report stated by the Ministry of Health (MOM), it shows the huge increasing percent from 4.4 percent at 2006 then increased to 15.1 percent in 2011. From this statistic, it shows that obesity among Malaysian are becoming a serious problem. The escalation of obesity, once thought to be an urban phenomenon, has now spread to the rural population at an alarming rate.

As Malaysia proceeds rapidly towards a developed economy status, the health of its population will probably continue to deteriorate. Therefore, a national strategy needs to be developed to tackle both dietary and activity contributors to the excess weight gain of the Malaysian population. One of the factors that influence the increasing factor of obesity is fast food intake. As the economy pass by, the fast food restaurant can be fine everywhere in Malaysia. The first franchise fast food was brought into Malaysia in 1963 was A&W by Mr. and Mrs. Lie Off from ASSAI.

The Lie Off family opened their first outlet in Jalan Tanjong Abdul Raman making it the first fast food outlet in Malaysia. From there, Malaysian community start eat fast food and one by one the fast food restaurant came into the Malaysia like KFC, McDonald's, and many more. Malaysian love to choose all those restaurant as it is easy and affordable to get. As the fast food has wide the empire in Malaysia by enhance the service like drive thru restaurant that people can get the meal without leave the car and delivery service that just pick up the phone and the meal inferno your door.

It is the best reason why even though there is a stall all around in Malaysia, served the Malaysian food, the Malaysian like to choose fast food restaurant as their restaurant to get food. According to Hussein (2011), the ability of western fast food restaurant to cater to local Muslim market created a huge impact on local food restaurant in Malaysia. According to Small et al (2002), the improvement in socioeconomic status increases the obesity prevalence which the people are used to leading a sedentary life style and unhealthy habit.

The statement agreed by Paltrier and Alaska (2012), most of the people in this millennium century are working people. They have to work to support their family. If 20 years back, women who has their own career is difficult to see, most of them are house wife. They prepared all the food for themselves and family, but in the modern live they also working to support their family. Sometimes they do extra time from the normal working hour. That lead to the buy outside food as it is easy to get and the food are ready to eat without have to prepared all the food after a long hour stay in their workplace.

Another key factor that contribute in the increasing the number of obesity factor was the eating behavior. Shootout et al (2004), mention that most of the obesity people is working. People who are working sometimes face with the irregular working hour. So they have to skip the meal or eat the meal late at night. This factor play a main role in change the diet structure. People tend to take a large amount of food for one short to ensure saving their time to cope with their responsibility at work.

For the parents, they don't have enough time to prepare the food for family and for working women it is hard for them in balance between family and work. Therefore, the easiest alternative is to buy a food outside which the nutrition and hygiene of that food can be questioned. According to Paltrier and Alaska (2012), constraints in time stressing, working people and modern family might substitute time-saving options which the priority to eat food rather than emphasize the nutritional values that are supposed to be the heart of concern.

Culture certainly has a big influence on behaviors leading to weight gain. The concepts of personal well being such health, affluence, beauty, strength and prosperity are modeled and learnt from society at large according to Amounts (1994). As such, culture and society that accepts overweight as favorable, would lead to behaviors that reinforces weight gain. Behaviors that lead to weight gain are influenced at various social levels such as peer groups, parents, partners, friends and authority figures, or socio-economic environment.

It is usual that people tend to eat the foods that are eaten by their family and friends for reasons such as having a sense of acceptance and belonging, compliance to authority. According to Sob (1995), community must having consistencies in attitudes, beliefs and habits of diet and nutrition formed through learning. Other social influence variables in gender roles. The women tend to be tatter, the life development such people tend to grow fatter as they age, and then decline as the bodybuilders.

One such cultural influence with regards to socio-economic environment is eating out. Eating out has become popular as it is highly convenient for today's modern household. French et al. (2001 ) says that eating out at restaurants and eating food prepared away from home has been found to be increasing in trend in the past 20 years. Local data shows similar trend not only in the urban but also in the rural area . Moreover, food prepared away from home tend to be larger in portion, as well as higher in fat ND energy.

This change in nutritional quality is a cause for concern as there is increasing intake of higher than needed energy consumption. Mass media influence plays a large role in eating out behavior by exposing messages that encourage food consumption, which leads to the increase Of food availability . On the other hand, people nowadays are more used to a sedentary life style. The evolution of moderntechnologyhas created machines that replace the human role in performing quite a number of daily chores. We are no longer walk to our destination due to the convenience of al sorts of transportation.

On the other hand, more sophisticated and smart technology too influence people in using modern gadget make this situation become worse. According to Inorganic (2006), people nowadays move less frequent as more they now prefer spending time sitting in front of computers or using their cell phone to update their status in medial social such as faceable, twitter and many more. Furthermore, modern kids now prefer to play online game using their gadget rather than to get involved in the outdoors sports such as football, basketball, hockey and many more.

Therefore, according to Somatic (2014), a combination of sedentary life style and unhealthy diet is the main factor that contribute to the growing prevalence in obesity among Malaysian. From the influence factor of obesity, the government had come with some prevention on it under the 8th Malaysian Plan (PM). The government has been trying to promote local fast food industry by offering financial and training support to those Malaysian that interested . This situation indirectly increases competition among fast food companies and it changes the Malaysian appetite from traditional local delicacies to fast food respectively.

The result from this situation is the nutrition imbalance because fast food is incantation with high sugar and fat. According to Geek (2012), Malaysia has been experiencing an upward trend in term of the availability of calories from animal and having escalation of availability of sugar has from 28. 8 keg to 48. 7 keg between 1 967 and 2007. Even though this situation will pose a negative impact on the human health over a long term of consumption, it is not really highlighted.

According to Phantasmagoria and Pranks (2007), Malaysian was obscured by other element such as nice packaging, delicious in taste, attractive promotion and good service to increase people excitement in enjoying this type of food. People nowadays are more used to a sedentary life style. The evolution of modern technology has created machines that replace the human role in performing quite a number of daily chores. People no longer walk to our destination due to the convenience of all sorts of transportation.

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According to Moravian and Mood (2012), people in Malaysia love to served a lot of their traditional food and people will take a chance to taste as many types of food as they can. Usually that kind of traditional food they only can find on that festival. For example, Hair Ray festival, Malay people like to SE coconut milk when preparing their traditional dishes. The other festival also in use of unhealthy ingredients for several traditional food like adding the coconut milk and using a lot of oil make the food unhealthy to be consumed.

Chon, (1984) says that, the risk of obesity will increased by taking a large amount of unhealthy type of food. According to the president of Malaysian society, Mood Small Nor (2014), Malaysian is ranked sixth in the Asia-Pacific region for obesity and diabetes. It shows that it is crucial to call for the government's attention on this unhealthy development. It agreed by Mood, (2002) it provides a rough picture on the real situation happened in Malaysia where the modernization really brought the huge changes for all Malaysian in taking the food and influence the majority to practicing sedentary lifestyle.

As a result, Malaysian The Malaysia National Health Morbidity Survey 2011 (OHMS VIVO, obesity is one of the risk factors that play a main role in the increase of non-communicable diseases (NC) such as, diabetes mellitus, hypertension, and cardiovascular disease . This survey was run under the Institute of public Health. It is an authority to conducts every 4 ear to collecting data to provide trends on the prevalence of certain diseases and health behaviors.

The objective of the server was to provide health related community-based data and information so as to inform the Ministry of Health Malaysia in the review of health priorities, programmer strategies, activities as well as and the planning and allocation of resources. Therefore, the comparison with The Malaysian National Health Morbidity Survey 2006 (OHMS III) indicated that three-fold rise in the prevalence of obesity, from 4. 4% in 1996 to 15. 1% in 2011 which equates to approximately 2. Million Malaysian met the criteria for obesity.



Based on this figure, it shows that obesity has become a burden which it also include the increase in the prevalence of Non-communicable disease (NCD) respectively. According to Fissile et al (2014), obesity was categorized to reach the epidemic level and Malaysia was leading nation among the developing countries. Based on data from OHMS IV, Malaysia ranked top of obesity in South-East Asia country, placed sixth prevalence in Asia and ranked 39th worldwide. This alarming statistics indirectly tell that Malaysia actually facing far more serious health robber compared to other countries in the region.

The Malaysia Government under our Prime Minister Datuk Seri Mohd Najib bin Tun Haji Abdul Razak was launched the Economy Transformation Programme (ETP) that plays a comprehensive effort to transform Malaysia into a high- income nation by 2020. The programmed focus on a few key growth engines that is the 12 National Key Economic Areas (NKEAs) which healthcare is one of the core factors as a driver of economic activity that has the potential to directly and materially contribute to a quantifiable amount of economic growth. To achieve the objective that has been set, it requires a productive nation to ensure the success of this programmed.

If the incident of obesity still in the arising trend and the people of Malaysia will be having potential to comply to NCD, it will to slow down the journey to reach the aim of this programmed. According to Taylor (2006), the active and healthy people are needed in order to determine the high achievement and acquire success. National Strategic Plan for Non-Communicable Disease (NSP 2010-2015) was developed to battle the current crisis that prevalence

of non-communicable diseases (NC) and NC risk factors in Malaysia which increase at an alarming rate.

To achieve the objective of this plan, the main programme that highlights is integrated and comprehensive service delivery. It was conducted under Non-Communicable Disease-I Malaysia Prevention (NCSC-IM) programme which will focus more on primary care clinics equipped to provide a full range of NC services, including promotion, preventive or wellness services, screening, 'identification of risk factors', intervention, treatment and rehabilitation.

As a result, 32,000 clients had been purported at 496 NCSC-IM project sites which in total, 55,000 NC risk factor screening procedures had been undertaken between October 2010 and December 2012. The NCSC-IM is a unique project where it plays an important role to design the community health volunteers and trains them the basic principles of healthy living, pathologically, and the epidemiology of NCSC. Apart from educating and advocating healthy lifestyles, they are also trained to conduct blood sugar tests, body mass index (BMI) and blood pressure measurements, and to read and interpret results from these screening tests.