EXPLORING BELIEFS AND PERCEPTIONS ABOUT OBESITY AMONG BLACK SOUTH AFRICAN UNIVERSITY STUDENTS

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REMARKS

The reader is reminded of the following:

- This mini-dissertation has been written in the NWU approved article format, which consists of an introductory chapter, one research article containing the main findings of the study, and a final chapter outlining the conclusions, limitations, and recommendations pertaining to the study.
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SUMMARY

Topic: Exploring beliefs and perceptions of obesity among black South African university students

Key terms: Obesity, cultural beliefs, perceptions, symbolic interactionism, university students

This mini dissertation presents a discussion of the exploration of the beliefs and perceptions of black South African university students between the ages of 18 and 24. The sample in the current study consists of 9 male and 9 female students registered at North-West University Vaal Triangle Campus. An explorative qualitative research design was used. Semi-structured interviews were used to gather data.

A substantial finding that materialised in relation to participants’ views of obesity was a degree of ambivalence between traditional African conceptions of obesity as a symbol of beauty, and modern Western views of obesity as being unattractive. The results also reveal that participants maintain that obesity was an indication that someone was wealthy and affluent. This view was also held among the participants’ peers. The results show that participants believe that obesity is caused by several factors that include dietary habits, eating patterns and several social influences. The participants mentioned that the most prominent cause of obesity was poor food choices. They explained that people tend to eat food that is convenient for them. This can be seen as carelessness because they do not watch what they eat. Participants also noted that as consequence of being obese, an individual might be treated differently and seen as an outsider. This could result in name calling and mocking from different members of their communities. Although there are slight differences when it comes to how obesity is viewed, these findings suggest that the younger generation of African participants in this study hold similar views to those of their adult counterparts, as reflected in previous studies.
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CHAPTER 1
INTRODUCTION, PROBLEM STATEMENT, AND OBJECTIVES

The aim of this chapter is to familiarise the reader with the study on which the mini-dissertation is based. The main aim of the study presented here is to explore the beliefs and perceptions about obesity among black South African university students. A brief introduction is followed by an overview concerning obesity as well as a review of existing literature on the topic. The research problem is outlined next, which is followed by an outline of the main research questions and the aims guiding the study. Ontological and epistemological positions are also described, followed by a discussion of the research methodology that guided the study. Ethical matters related to the current study are also described and the chapter is concluded with an outline of the division of chapters of the mini-dissertation.

1.1 Introduction

A few years ago, Kruger, Mitchell and Welman (2005a:491) stated that obesity rates seemed to be on the rise globally. Caballero (2007:1) resounded this sentiment by showing that the prevalence of obesity in industrialised countries showed a progressive increase early in the last century. According to the Mayo Clinic (2009), the prevalence of obesity has increased three fold in the two decades prior to 2000. Nonetheless the World Health Organisation seems to have a different statement based on the previous observation. The World Health Organization (2014) claims that since 1980, obesity rates have increased two fold. In light of this, their figures show that 200 million men and nearly 300 million women worldwide were classified obese (WHO, 2014). Pengpid and Skaal (2013:563) claim that in the African continent, South Africa has the highest prevalence of obesity.

Being of black African descent, the researcher has realised that the individuals in the black community have an array of beliefs and perceptions with regards to obesity, some of which seem to markedly differ from mainstream perceptions that seem common in Western cultural contexts. Such beliefs and perceptions might pose significant challenges when it comes to obesity management and prevention in South Africa (Joubert, Matu, Mohale, Ntechane, Nyindi, Prinsloo & Struwig 2011:367). An improved understanding of beliefs and perceptions related to obesity among black South African university students will enhance the
development of interventions that are culturally relevant and have a higher likelihood of success.

1.2 Problem Statement

Devanathan, Esterhuizen and Govender (2013:2) mention that South Africa has stumbled upon an accumulative burden of non-communicable diseases associated with overweight and obesity. At the forefront of the determinants of this epidemic are women’s perceptions of their body image (Devanathan et al., 2013:2). In a study aptly named ‘Big is Beautiful’, it was discovered that community health workers preferred a larger body because of the attached positive connotations (Devanathan et al., 2013:2). A decade ago, in a study conducted by Pengpid & Skaal (2011:563), it was stated that 56% of white men, 49% of black men and 75% of black women in South Africa were overweight or obese. Pengpid and Skaal (2011:563) believe that one of the influences that probably contributed to the high prevalence of obesity among the black population in this study was culture-related attitudes towards obesity. In South Africa, a woman’s perception of an ideal weight appears to be influenced by multiple factors including culture. Black women have testified that being overweight and even obese intensifies their desirability by men (Devanathan et al., 2013:2). Similarly, Moraba, Motaung and Sengwayo (2012:43) mention that South African black females think that being overweight is beautiful and attractive. Black South Africans tend to associate being overweight with being affluent and not having illnesses such as HIV. As such, a perception that being overweight is desirable may be related to the AIDS epidemic, with a perception that thinness is associated with an HIV-positive status (Devanathan et al., 2013:2). Consequently black South Africans do not see being overweight as a health hazard (Devanathan et al., 2013:2). Similarly, Goedecke and Jennings (2005:549) state that even though community health workers are aware of the negative elements associated with obesity, they preferred to be slightly overweight, regarding a body mass index (BMI) of 27 as ideal, owing to the association between thinness and HIV/AIDS. According to the Centers for Disease Control and Prevention (2015), a body mass index of 27 is an indication that the individual is overweight. Obesity and overweight ranges are measured by using an individual’s weight and height to calculate the (CDC, 2015). The CDC (2015) explains that BMI is used because it links with an individual’s amount of body fat. An adult who has a BMI between 25 and 29.9 is considered to be overweight and an adult who has a BMI of 30 or higher is considered obese (CDC, 2015). Devanathan et al. (2013:2) noted that many
individuals are purposefully becoming obese to avoid the stigma of being associated with being HIV positive. Although being obese carries with it the risk of non-municable diseases, Puoane, Steyn and Tsokolile (2010:32) reveal that people are resistant to losing weight in case people thought they had HIV/AIDS or TB. Joubert et al. (2011:367) remark that black South African women usually regard increased body mass as a sign of wealth, marital harmony, and sufficient food supply and have stated that in their community’s view, being overweight is a reflection of prosperity or material and financial wealth and someone who is underweight is not considered to be affluent.

When tackling a health issue such as obesity, researchers tend to gravitate towards explaining it by using the biomedical view. The high prevalence obesity is often attributed to factors such as lack of physical activity, genetic predisposition, and incorrect dietary consumption. However, there are few researchers who take an in-depth look into the ethnic and cultural factors associated with obesity; and those who do mention such factors tend to only do so briefly. As put forward by Hughes and Puoane (2005:229), there is a need for the promotion of culturally relevant educational messages when tackling the obesity epidemic. Furthermore, the educational messages recommended for most non-communicable diseases tend to follow the same path (Hughes & Puoane, 2005:229). Hughes and Puoane (2005:229) explain that the message is to follow the correct diet, be physically active, decrease stress levels, visit a doctor regularly, and screen for the prevention and early detection of disease. As a result of such educational messages, there are relatively few studies that document the social, cultural and ethnic factors that contribute to the obesity epidemic. The majority of studies that investigated the perceptions and beliefs of Africans with regard to obesity focused on adult views. Therefore it is essential that the views of a younger age group, such as undergraduate university students, are investigated. There is a need to know whether the views held by the adults in previous studies were the same as those of a younger generation. Such findings will shed light on whether any generational shifts in perspectives on obesity might be occurring.

Moreover, the studies on the adult views tend to use a purely quantitative approach. This therefore necessitates a study that will explore the beliefs and perceptions about obesity among a younger group of black South Africans from an insider’s perspective. A qualitative approach is ideally suited to such an aim as it enables a given phenomenon to be explored from within the life world of the individual (Fetterman, 2008:249). A study such as this will give those tackling the obesity epidemic a better chance at possibly modifying strategies that ignore cultural and ethnic beliefs and perceptions of obesity. For strategies to be effective,
Hughes and Puoane (2005:229) believe that heightened awareness of beliefs and perceptions about obesity need to take centre stage in public health mandates. It therefore becomes essential that research undertaken in the field of obesity emphasises the role of beliefs and perceptions.

1.3 Research Questions
In light of the gaps and concerns outlined above, the following research questions were formulated:

1.3.1 Main Research Question
- What are the beliefs and perceptions about obesity among black South African University students?

1.3.2 Secondary Research Questions
- What is currently known about beliefs and perceptions about obesity among black South Africans?
- What are the views about obesity/obese person?
- What are the views of the causes of obesity?
- What are the consequences of the views of obesity?

1.4 RESEARCH OBJECTIVES
The following general and specific research objectives were set for this study:

1.4.1 General Research Objective
- To explore beliefs and perceptions about obesity among black South African university students

1.4.2 Specific Research Objectives
- To conduct a literature review of research dealing with the beliefs and perceptions of obesity among black South Africans.
- To explore the views about obesity and/or the obese person
- To explore the views of the causes of obesity
- To explore the consequences of the views of obesity
1.5 THEORETICAL FRAMEWORK OF THE STUDY

This section is devoted to matters relating to the ontological, epistemological and theoretical perspectives that are applicable to the study.

1.5.1 Ontological and epistemological assumptions guiding the study

The current study is guided by an interpretivist ontology and a constructivist epistemology. Sarantakos (2005:30) states that ontology refers to the nature of reality and its central question is if social entities should be viewed subjectively or objectively. From an interpretivist point of view, reality is best understood through perceived knowledge (Carson, Gilmore, Gronhaug & Perry, 2001:6). An interpretivist ontology is appropriate for the current study which aims to explore the participants’ subjective views about obesity.

Epistemology deals with the nature of knowledge (Sarantakos, 2005:30), and it is concerned with how reality can be known, the connection concerning the knower and what is known and the assumptions that direct the process of knowing and the attainment of findings (Vasilachis de Gialdino, 2011:3). A constructivist epistemology sees knowledge as being and subject to interpretation (Sarantakos, 2005:37). The researcher is not seeking to discover any pre-existing truth about the beliefs and perceptions about obesity among university students but aims to obtain an insider perspective of the culturally defined interpretations and personal experiences of the participants in relation to obesity. These ontological and epistemological positions have been enlisted in the present study through making use of a qualitative research methodology, which is drawn from an interpretivist ontology and a constructivist epistemology.

1.5.2 Theoretical Framework

The current study is undertaken within the field of sociology and guided by the symbolic interactionist theoretical framework. Symbolic interactionism is a paradigm which holds the notion that human behaviour involves the creation of meaning through social interactions, with those meanings conditioning subsequent interactions (Babbie, 2013:62). Belgrave and Charmaz (2013:11) maintain that according to this perspective, concepts of self, social situations and society are accomplished through people’s actions and interactions. Moreover, this perspective accepts that society and collective life lead the individual and forms contexts for action and interpretation (Belgrave & Charmaz, 2013:13). One of the principles of symbolic interactionism is that people, individually and collectively, act on the basis of the
meanings that things have for them (Allen & Benzies, 2001:544). Belgrave and Charmaz (2013:14) state that interaction is dependent on spoken and unspoken shared language, symbols and meanings. In relation to the current study, it is argued that perceptions and beliefs about obesity could be usefully analysed from a symbolic interactionist perspective, in which obesity would be regarded as a symbol in relation to which different groupings of people socially construct and assign different meanings through shared language. These meanings would in turn drive individual and social action.

1.6 Research Method

1.6.1 Phase 1: Literature Review

For the purpose of attaining significant contextual information regarding the research topic, a comprehensive literature review was conducted. The literature review enables the researcher to investigate what is currently known about the chosen topic and to identify strengths and weakness in previous studies (Smith, 2012). The latter assists the researcher in reducing the prospective weaknesses in their own study. The researcher gathered the literature that was applicable to the study by reading through books, academic journal articles and other sources. These sources were gathered from internet databases such as JSTOR, EBSCOHOST, Google scholar and SABINET. There were certain keywords used for the search and they were: Obesity, perceptions of obesity, African communities, black South African university students, and qualitative research. Elements of literature that were discovered were screened and subsequently included in the study or excluded based on their significance to the research aims that have been set for the study.

1.6.2 Phase 2: Empirical Study

The following section provides an overview of the empirical phase of the study, and outlines matters such as the research design, participant selection, data collection, research procedures, and data analysis strategies relevant to the study.

Research design

An exploratory qualitative research design was adopted for the purpose of the present study. Kruger, Mitchell & Welman (2005b:8) declare that the purpose of qualitative research is to explore subjective data that is produced by the minds of the participants. Additionally Brynard, Brynard and Hanekom, (2014:39) explain that the theme of qualitative research is phenomenological as the participants’ perspective is the realistic point of departure. The
crucial point of any qualitative research project is on the real-life experience of people (Brynard et al., 2014:39). Brynard et al. (2014:39) explain that during the qualitative research process when the researcher discovers novel or unforeseen findings, they may decide to alter their research plans in response to these chance discoveries. In qualitative research, the role of the researcher is to recognise the significance the participants attach to their environment (Kruger et al., 2005:8). In the present study, the researcher had a desire to gain a better understanding of the subjectively held beliefs and perceptions about obesity among black South African students, and as such, qualitative research was the most appropriate approach to use during this study. A qualitative approach was relevant to this study because the focus was on the interpretation of phenomena in the participants’ natural settings and the meanings that participants carry into these settings.

**Participants**

For the selection of the research participants, purposive sampling was used. Babbie (2013:129) maintains that a researcher may choose purposive sampling because of their desire to study a small subset of a larger population whereby the members of a subset can be easily identified but a record of them all would be nearly impossible. Kruger et al. (2005:69) state that when making use of purposive sampling, researchers will rely on their personal experience to purposefully attain units of analysis in a way that the sample is seen as being representative of the relevant population. As such, purposive sampling involves the establishment of sampling criteria. In the present study, the following inclusion criteria were set:

- Participants had to be full time students enrolled at a South African university.
- Participants had to be black.
- Participants had to be between the ages of 18 and 24.

A poster advertising the research project was put up around the various notice boards on campus. The students were advised to contact a designated administrative assistant should they be interested in taking part in the study. A few of the students who had shown interest decided to not take part in the research project because they would not be compensated. Some of the initial participants lost interest in the topic. In the final sample, nine men and nine women consented to take part in the study. The researcher used students enrolled in first, second, and third year classes as the participants of the study. To ensure that both genders
were adequately present in the sample, quota sampling was used as an additional sampling strategy to ensure that an equal number of male and female participants were selected. As qualitative research designs tend to be flexible, sample size is often determined on the basis of emergent findings and considerations related to theoretical saturation, rather than being determined in advance (Henning, Smit & Van Rensburg, 2004). For the purpose of the current study, the researcher recruited a sample of 18 participants. These participants were made up of 9 black females and 9 black males registered as students at the North-West University Vaal Triangle Campus. The participants of the study live in different areas of the Vaal Triangle.

Data collection

Kruger et al. (2005:198) indicate that the researcher uses interviews in an attempt to recognise how individuals experience their life-world and how they make sense of what is happening to them. The inference is that as a researcher one needs to have questions that are directed at the participants’ experiences, feelings, beliefs and convictions about the theme at hand (Kruger et al., 2005:198). Kruger et al. (2005:198) warn researchers about steering clear of asking leading questions. Semi-structured interviewing was most suitable for this study as it gives the participants the opportunity to give detailed information on their beliefs and perceptions about obesity. Jamshed (2014:87) explains that semi-structured interviews involve a set up whereby participants have to answer predetermined open-ended questions. When using semi-structured interviews, the researcher has an opportunity to create an interview guide which consists of a list of questions or topics that need to be covered (Hofisi, Hofisi & Mago, 2014:62). Hofisi et al. (2014:62) state that semi-structured interviews are flexible as they enable participants to alter their responses and give the researcher an opportunity to explore any essential responses.

To guide the interviews, the following questions were used:

1. What do you think when people have (or put on) a lot of weight?
2. What does putting on weight or having a lot of weight mean among your peers in your community? (This question was deliberately phrased in an indirect way. Such questions are valuable in cases where it is suspected that participants might not feel comfortable in offering direct information about the research questions. In such cases
an indirect question enables participants to express views which they might not feel comfortable in attributing to themselves (Sarantakos, 2013:255).

3. When would you regard someone as being overweight? This helped in clarifying the definition of overweight from the participant (rather than the researcher’s) point of view.

Where necessary, these questions were followed by various prompts to encourage participants to elaborate on their answers. Throughout the data collection process, the researcher recorded observations and reflections in the form of field memos, which served to supplement and contextualise the data from the interviews.

**Research procedure**

The researcher put up a notice on campus which invited the students to take part in the study. Students were requested to contact the researcher telephonically or by means of e-mail. An appointment for an interview was scheduled with each participant who responded (within the limitations of the quota sampling requirements that have been set for the study). The interviews were held in a private office on campus. The interviews were held at a date and time that was agreed upon by the researcher and the participants. The researcher explained the implications of the study and the risks and benefits associated with the study to the participants. The researcher also obtained informed signed consent from all participants. All interviews were audio recorded with the permission of the participants. The interviews were transcribed, and the transcripts were prepared for analysis.

**Data analysis**

Data analysis is a procedure that involves the creation of various themes and concepts, these are then expanded on and authenticated. The initial phase of this process entails the coding of the data acquired from the semi-structured interviews. The researcher tells a story about the participants’ experiences, interactions and words through the themes and concepts. Corbin & Strauss (2008:57) explain that the data analysis process requires reviewing data for further themes or concepts until no further themes and concepts can be found.

Data was analysed by means of thematic content analysis, following the procedure outlined by Tracy (2013). In order to familiarise herself with the data, the researcher read through the textual data from the interviews several times. The data was then divided into units of meaning, which were given a code label. The data set was first coded in its entirety.
Following this, the codes that were identified during this first stage were further developed in terms of their properties and dimensions by means of a process of constant comparison. They were then grouped together based on conceptual similarities and subsequently integrated into categories by means of written memos and visual diagrams. Emergent categories were related to each other and examined for interrelationships by means of axial coding.

1.7 Ethical Considerations

When carrying out any form of research, ethical considerations need to be taken into account. Rosenthal and Rosnow (1996: 406) state that ethics is the system of moral values by which behaviour is judged. Furthermore it is a set of rules, principles or ways of thinking that guide the actions of a particular group (Singer, 1994:4). In other words, the researcher has certain standards and principles to measure choices between doing right and doing wrong. Prior to the commencement of the study, the research proposal was submitted to the Human Health Research Ethics Committee of the North-West University for ethical clearance (NWU-HS-2015-0103).

After the ethical clearance was received, potential participants were given information about the research topic and its aims. The participants were informed that their participation was voluntary and they had the right to withdraw at any time without penalty. Hesse-Biber and Leavy (2011:116) advocate informing participants of their right to withdraw from the study at any point. As set out in the American Sociological Association (2008:14) guidelines, participants need to be informed what the study is about, what the risks and benefits are and how the results will be used. This was put in place by ensuring that informed consent was obtained from all the participants. The participants remained anonymous and transcripts from their interviews were locked in a safe place that could only be accessed by the researcher.

1.8 Chapter Division of the Mini Dissertation

The article method was followed in the writing of the mini-dissertation. The layout of this work is outlined below.

Chapter 1: Introduction, problem statement, and objectives

Chapter 2: Article: A qualitative exploration of beliefs and perceptions about obesity among black South African university students

Chapter 3: Conclusions, limitations, and recommendations
### 1.9 Chapter Summary

The purpose of this introductory chapter was to give background information relevant to the study on which the mini-dissertation is based. The chapter started with a review of the existing literature on the beliefs and perceptions about obesity among black South African university students. Following this, the theoretical framework guiding the study was discussed. An outline of the methodology that was used when conducting the study followed and the ethical considerations were discussed. The second chapter consists of the findings stemming from the study are presented in the form of a research article (which is in line with the article format as specified by the NWU). The third and final chapter provides a detailed summary of the implications, limitations, and recommendations that are relevant to the study.
References


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EXPLORING BELIEFS AND PERCEPTIONS ABOUT OBESITY AMONG BLACK SOUTH AFRICAN UNIVERSITY STUDENTS.

ABSTRACT
This article explores the beliefs and perceptions about obesity among black South African university students. Contrary to former studies which employed quantitative approaches and focused on the views of the older generation of the black population, this study used a qualitative approach and focused on university students aged 18 to 24. Semi-structured interviews were used to gather data for the study. Participants were comprised of students from the North-West University Vaal Triangle Campus. Concepts such as the views of the cause of obesity, the views of obesity and the consequences of those views were explored. The results show that participants believe that obesity is caused by several factors that include dietary habits, eating patterns and several social influences. The participants believed that the most prominent cause of obesity was poor food choices, motivated by convenience and sustained by carelessness in dietary choices. A significant finding that emerged in relation to participants’ views of obesity was a degree of ambivalence between traditional African conceptions of obesity as a symbol of beauty, and modern Western views of obesity as being unattractive. The results also reveal that participants maintain that obesity was an indication that an individual is wealthy and affluent. This view was also reportedly held among the participants’ peers. Peer views have a powerful effect in shaping people’s perceptions this may indicate the significance of group education in assessing and encouraging health changing beliefs and attitudes. Participants also noted that as a consequence of being obese, an individual might be treated differently and seen as an outsider in a given community, which sometimes resulted in name calling and mocking from different members of their communities. Although there are slight differences when it comes to how obesity is viewed, the findings suggest that the younger generation’s views of obesity are generally similar to those of older adults, reported in previous studies.

Keywords: Obesity, cultural beliefs, perceptions, symbolic interactionism, university students
INTRODUCTION

The present article is devoted to addressing the questions: what are the beliefs and perceptions about obesity among black South African university students? What is currently known about beliefs and perceptions about obesity among black South Africans?

The World Health Organization (2014) asserts that since 1980, obesity rates have doubled. In light of this, their figures show that 200 million men and nearly 300 million women worldwide were classified obese (WHO, 2014). As a member of the black African population, the researcher has recognised that the individuals in the black community have an assortment of beliefs and perceptions with regards to obesity. Such beliefs and perceptions might cause substantial challenges when it comes to obesity management and prevention in South Africa (Joubert, Matu, Mohale, Ntechane, Nyindi, Prinsloo & Struwig, 2011:367). A heightened understanding of beliefs and perceptions related to obesity among black South African university students might therefore expand the development of interventions that are culturally relevant and have a greater likelihood of success.

Beliefs and perceptions about obesity in African communities

Devanathan, Esterhuizen and Govender (2013:2) state that the World Health Organization approximates that over 300 million adults are clinically obese globally. Similarly, Pengpid and Skaal (2011:563) suggest that in a global context, the prevalence of obesity is extremely high with at least 300 million people being clinically obese. There was a time when it was believed that obesity was only prevalent in high income countries but this has changed. Fotso, Ochako and Ziraba (2009:465) state that overweight and obesity are now prevalent in low and middle income countries. In Africa, South Africa is believed to have the highest prevalence of obesity (Pengpid & Skaal, 2013:563). Adeboye, Bermano and Rolland (2012:512) suggest that there was very little attention given to the obesity epidemic and it may have been driven by the misconception of ‘healthy’ or ‘benign’ obesity. This misconception was highly publicised in South Africa from the 1960s until the 1980s and led to gross disregard of the problem of obesity and the treatment of its associated co-morbidities (Adeboye et al., 2012:512).

Using a sample of 382 participants in a rural black community based in Limpopo, Moraba, Motaung and Sengwayo (2012:47) investigated the distribution of obesity by age and gender. The total prevalence rate for obesity was found to be 6.3% for males and 29.4% for females, proposing that that obesity might be more predominant among black women than men.
Devanathan et al. (2013:2) mention that South Africa has stumbled upon an accumulative burden of non-communicable diseases interconnected with overweight and obesity. Women’s perceptions of their body appearance are one of the leading contributing factors of the epidemic (Devanathan et al., 2013:2). In a study fittingly named ‘Big is Beautiful’, it was discovered that community health workers favoured a larger body because of the attached positive insinuations, which included being seen as dignified, being respected, the perception that one is wealthy and strong (Devanathan et al., 2013:2). Pengpid & Skaal (2011:563), discovered that 56% of white men, 49% of black men and 75% of black women in South Africa were overweight or obese. Pengpid and Skaal (2011:563) concluded that culture-related attitudes towards obesity influenced the high prevalence of obesity among the black population.

In South Africa, an African woman’s perception of an ideal weight appears to be influenced by various factors including race. In their study, Bradshaw, Fourie, Lambert, Laubscher, Mbananga, Puoane and Steyn (2002:1044) discovered that black women were more tolerant of a bigger body size than those with mixed ancestry and their white counterparts. It was found that black girls were less likely to desire a smaller body size than white girls (Bradshaw et al., 2002:1044). A study conducted by Akinrinlola (2012:3) found that one third of women in the Free State Province believed that an overweight body was the ideal. A number of black women testified that being overweight and even obese made them more desirable to men (Devanathan et al., 2013:2). Likewise, Moraba et al., (2012:43) mention that South African black females think that being overweight is beautiful and attractive. This clearly demonstrates that racial variations in perceptions of obesity exist. Joubert et al. (2011:367) mention that black South African women usually look at increased body mass as a sign of wealth, marital harmony, and sufficient food supply and have stated that in their community’s view, being overweight is a reflection of prosperity or material and financial wealth and someone who is underweight is not considered to be affluent. Black South Africans tend to associate being overweight with not having illnesses such as HIV. As such, a perception that being overweight is desirable may be linked to the AIDS epidemic, with a perception that thinness is associated with an HIV-positive status (Devanathan et al., 2013:2). As a direct result of the fear of being labelled as being HIV-positive, a large number of black South Africans did not believe that being overweight put their health in any serious risk (Devanathan et al., 2013:2). Goedecke and Jennings (2005:549) found that black South African community health workers preferred being overweight despite having knowledge of
the dire health consequences of being obese. The reasoning behind the preference was the idea that being thin meant you were HIV-positive (Goedecke & Jennings, 2005:549). In order to avoid the stigma that was attached to being HIV-positive, a significant number of people were choosing to gain an excessive amount of weight (Devanathan et al., 2013:2). In a similar vein, findings by Puoane, Steyn and Tsolekile (2010:32) revealed that people were afraid to lose weight because they feared that other people would think they had HIV/AIDS or TB.

Beliefs and perceptions about obesity among black South African university students

The bulk of studies that explored the perceptions and beliefs of Africans with regard to obesity focused on adult views. A recent study conducted by Aryeetey (2016:2) described the beliefs, perceptions and experiences of urban-dwelling Ghanaian women regarding overweight. Using a sample of 42 female participants, it was found that there were favourable opinions of being overweight which stemmed primarily from personal interest, expectations from society and expectation of the women’s spouses (Aryeetey, 2016:6). For instance, it was believed that a husband was a good provider when his spouse gained some weight (Aryeetey, 2016:6). Moreover, Aryeetey (2016:6) found that there was a societal expectation of weight gain when a person had an enhanced source of revenue. Another study by Akinrinlola (2012:13) found that in the South African black population, obesity was caused by the spike in eating unhealthy fatty food and this was exacerbated by a culture of overeating. Akinrinlola (2012:13) mentions that people preferred to consume cheap food that was sometimes unhealthy because they believed a healthy diet was expensive. It was found that even though there was an awareness of the negative effects of obesity, it was a commonly held belief among community members that obesity was a sign that the individual was energetic, healthy looking, and free of any diseases (Akinrinlola, 2012:9). Although both studies unearthed significant findings that highlighted how people’s perceptions shape how obesity is viewed, the sample was not made up of a younger generation who were thought to have a somewhat higher level of formal education. Consequently it is critical that the views of a younger age group, such as undergraduate university students, are investigated. There is a need to know whether the views held by the adults in previous studies is the same as those of a younger generation. Such findings will shed light on whether any generational shifts in perspectives on obesity might be arising. Furthermore, the majority of studies on adult views of obesity in African contexts employed mostly quantitative approaches (Devanathan et al.
2013; Pengpid & Skaal, 2011; Moraba et al. 2012 & Puoane et al. 2010). Consequently, a need exists for a study that will explore the beliefs and perceptions about obesity among a younger group of black South Africans from an inside perspective. A qualitative approach is ideally suited to such an aim as it enables a given phenomenon to be explored from within the life world of the individual (Fetterman, 2008:249). A study such as this will give those dealing with the obesity epidemic a better chance at possibly adjusting strategies that ignore cultural and ethnic beliefs and perceptions of obesity. For obesity-prevention and management strategies to be effective, Hughes and Puoane (2005:229) believe that a finely tuned awareness of beliefs and perceptions about obesity need to take centre stage in public health decrees. It therefore becomes vital that research undertaken in the field of obesity emphasises the role of beliefs and perceptions. Given that these have not been well-researched among the younger generation of black South Africans, the main aims of the present study were to investigate beliefs and perceptions about obesity among black South Africans.

**METHODOLOGY**

An exploratory qualitative research design was used to gather data for this study. Kruger et al. (2005:8) emphasise that the purpose of qualitative research is to explore idiosyncratic data that are produced by the minds of the participants. Furthermore Brynard, Brynard and Hanekom (2014:39) explain that the approach of qualitative research is phenomenological as the participants’ perspective is the pragmatic point of departure. Brynard et al. (2014:39) highlight that the pivotal point of any qualitative research project is on the real-life experience of people. A qualitative approach is relevant to this study because it enables the researcher to question people about their experiences and the meanings they attach to their experiences. This approach was chosen because the researcher wanted to extract the deep seated beliefs and perceptions that were related to overweight and obesity, which are subjective phenomena that lend themselves to qualitative exploration (Tracy, 2013:5).

**Participants and sampling**

Purposive sampling was used to select the participants for the study. Sarantakos (2005:164) explains that purposive sampling is a procedure that the researcher uses their own judgement when selecting members of a population to take part in a study. The objective of purposive sampling is to deliberately select those participants who are most able to provide the type of
information relevant to answering a given research question (Sarantakos, 2005:164). Babbie (2013:129) states that a researcher may choose purposive sampling because of their desire to study a small subset of a larger population whereby the members of a subset can be easily identified but a record of them all would be nearly impossible. Marshall (1996:523) states that a fitting sample size for a qualitative study is one that can effectively answer the research question. The sample size for simple questions or detailed studies can be in single figures (Marshall, 1996:523). Marshall (1996:523) explains that the number of required participants tends to become clearer as the study advances; as new categories, themes or explanations stop emerging. For the purpose of the present study, the researcher used purposive sampling because the population in question had a special characteristic; black individuals between the ages of 18 and 24 who were enrolled at an institution for higher learning, the Vaal-Triangle campus of the North-West University. Quota sampling was employed as a supplemental strategy to ensure that an equal number of male and female participants were present in the sample. Kruger et al. (2005b:68) explain that quota sampling entails taking a tailored sample in proportion to a certain trait of a population. They go on to state that the researcher can divide a population by their sex, educational level or by the place they reside in (Kruger et al., 2005b:68). For the purpose of this study, the researcher chose individuals from the black South African population and they fell under the sub-group of university students. To ensure that each dimension of the population was represented, the researcher chose an equal number of males and females. The researcher used students enrolled in first, second, and third year studies as the participants of the study. The students were made up of 9 females and 9 males who were registered for various Bcom and Bsc undergraduate degrees. Virtually all the participants reside in the Vaal Triangle region.

Data collection

Data was gathered by means of semi-structured interviews. As proponents of using semi-structured interviews, Barriball and While (1994:330) mention that this method is appropriate for the investigation of opinions on issues that are often complex and sensitive. They go on to state that semi-structured interviews enable the researcher to probe for more information and clarity on answers than can typically be obtained via structured interviews (Barriball & While, 1994:330). Kruger et al. (2005:198) remark that the researcher uses interviews in an attempt to identify how individuals experience their life-world and how they make sense of what is happening to them. The inference is that as a researcher one needs to have questions
that are directed at the participants’ experiences, feelings, beliefs and convictions about the theme at hand. In light of the present study, semi-structured interviews were deemed suitable because it essentially allowed participants the freedom to express their opinions in their own terms. Two way communication is encouraged when using semi-structured interviews and therefore functions as a tool that permits the participants to direct questions at the interviewer (Barriball & While, 1994:330). This means that participants can ask the interviewer to clarify a question that they do not understand. Mears (2012:171) states that an open format is used during semi-structured interviews, and that the researcher tends to be directed by a list of primary areas of consideration for each session of the interview. An open format refers to the researcher using open-ended questions. To guide the interviews, the following questions were used:

- What do you think when people have or put on a lot of weight?
- What does putting on weight or having a lot of weight mean among your peers in your own community where you are from?
- When would you regard someone as being overweight?

The questions where followed by various prompts to encourage participants to elaborate on their answers.

Data analysis

The researcher transcribed and prepared the field notes and audio-recorded interviews in accordance with the guidelines proposed by Kruger et al. (2005:211). During this process, the researcher took note of and recorded pauses, incomplete sentences, mispronunciations and certain words the participants accentuated. Data was analysed by means of thematic content analysis as per the procedure outlined in Tracy (2013). The initial phase of open coding involved data being divided into units of meaning, which were given a code label by the researcher. The data set was coded in its entirety and then be subjected to a second round of coding in which data from male and female participants were analysed separately. In all cases, the codes that were identified throughout this first stage were further developed in terms of their properties and dimensions by means of a process of constant comparison, and then grouped together based on theoretical connections and consequently integrated into categories by means of written memos and visual diagrams. Emergent categories were related to each other and examined for interrelationships by means of axial coding.
Ethical considerations
During the course of the study, the participants were informed and reminded that their participation in the study was voluntary and that they had the right to withdraw at any time without penalty. As mandated by the American Sociological Association (2008:14) the researcher requested that the participants complete an informed consent form that informed them of what the study was about, what the risks and benefits were and how the results would be used. As stated by the American Sociological Association (2008:11) sociologists have an obligation to ensure that confidential information is protected. Therefore the researcher did not use any of the participants’ names in any written material that contains the research or in any discussions of the research project. Moreover, all the interview material was and still is stored in a safe place that no one (apart from the researchers) is able to access. The nature of this study was such that no harm was anticipated to occur. However, if any participant had felt that they did not wish to continue their participation in the study they were informed that they were free to withdraw from the research without penalty, and were informed of their right to do so in advance, as advocated by Hesse-Biber and Leavy (2011:116).

FINDINGS
The study findings are based on a thematic analysis of 18 semi-structured interviews conducted with 9 female and 9 male university students from the North-West University’s Vaal Triangle Campus. The findings of the study are organised according to three consistent themes that emerged from the analysis: views of obesity / obese persons, views of the causes of obesity, and the consequences of these views.

VIEWS OF OBESITY / OBESE PERSON
When it comes to how people view obesity and people who are obese, participants mentioned an array of both positive and negative perceptions, as will be discussed in this section.

Symbol of affluence and the good life
Participants were virtually unanimous in stating that an individual who was overweight or obese was believed to be living the good life. This was clearly expressed by one participant who stated that ‘I feel like in my community it could be attributed to a lot of things. For instance, as mentioned before, the good life’ (Participant 1). In this particular context, the good life referred to having the ability to purchase any food you wanted because you have the
financial resources to do so. Being overweight or obese was also reported to be seen as an indicator of wealth by most participants’ peers. This was echoed by the words of a participant who stated that ‘but then the general idea is about eating the kind of food you want and having money’ (Participant 2). Underlying these statements is the assumption that the types of food choices a financially well-off individual would or should make are those that promote weight-gain, rather than those which promote a leaner physique. This belief therefore appears to be tantamount to a tacit endorsement of obesity as visible indication of material well-being.

**Reluctance to express views**

A few of the participants were wary of expressing their own opinions in relation to obesity. This tendency was clearly illustrated by one of the participants who was comfortable sitting on the fence when asked for her opinion on what being obese meant to her. This participant stated: ‘I don’t see the need for us to differentiate between you and I; overweight, skinny’ (Participant 1). Another participant did not want to give her opinion when asked what gaining weight a representation is of as she feared it would make her appear to be judgemental. Participant 14 illustrated this by stating: ‘Well I don’t judge people because of their weight….so when I see someone who is overweight I don’t judge or think anything’. One of the reasons that people might be reluctant to express their views was that they did not want to appear to be bad people, ‘Oh my goodness, I don’t wanna be mean’, as participant 7 emphatically stated. Participants’ reluctance to express their personal views about obesity stood in contrast to the extent to which they were forthcoming about responses when they mentioned the opinions that their peers had of obesity. Furthermore, participants sometimes contradicted themselves, stating that they have no views on obesity as such views would be judgemental, but then going on to state fairly decisive views later on in the interview. This was illustrated by participant 6 who initially stated: ‘I mean I don’t want to sound like I am a bad person and I am judgemental because I’m not like that’. When questioned further, she went on to state ‘Okay I would say that people who are overweight from my perspective are big, they are huge. They have a big belly, they’re chubby and that’s all. I think they do not take care of their health and do not watch what they eat’. Taken together, this suggests that as far as views of obesity are concerned, a marked split between front and backstage behaviour appears to exist, and that publically stated views do not necessarily accord with privately held views.
Ambivalence in relation to obesity as a symbol of beauty

Thematic analysis of the interviews revealed that participants often espoused ambivalent views in relation to whether obesity represented physical attractiveness or its polar opposite. One of the participants who held such contradictory views about obesity as a symbol of beauty mentioned that although being overweight was generally a symbol of beauty in the black community, the influence of social media had changed this notion. This was made clear when he stated: ‘From the black community, there is the view that if you are overweight and have curves then you are beautiful in the African culture. But the way social media has affected us, some people feel that if you are overweight, you’re not beautiful and you’re not sexy or attractive to the males’ (Participant 11). Yet another participant echoed this when she explained the contrast between what is seen as beauty in the black community and what is accepted as beauty by social media standards. Participant 16 explains that ‘Within our black community there is a belief that if you are overweight, you are beautiful. However because of the way social media has influenced us, some people feel that if you are overweight then you’re not beautiful’. When prompted to disclose their own views, it appears that these participants were ambivalent and undecided, vacillating between traditional African cultural views and contemporary Western perceptions.

Sexual maturity and/or fertility

One of the male participants stated that if females gained weight, it was attributed to their sexual maturity. Interestingly, among the nine male participants interviewed, only one offered this point of view. He explained that based on where he is from, how a female looks in terms of their body is a reflection of her readiness to engage in sexual activities. As he stated: ‘You would find that in the townships where we live we would say this girl has gained weight and she’s thick and that is seen in a sexual manner. This means this girl is sexually mature’ (Participant 10). The male participant added that he believes that if a female gains weight, it shows that this female is fertile and as a result, she is more desirable. He expressed the view that: ‘If a woman is overweight, I regard that person as being able to bear children’.

Negative views of the character of the obese person

As stated by several of the participants, a number of negative attributes were ascribed to overweight and obese people. These included but were not limited to, being called lazy, labelled as a loser, and being unlovable. As one participant stated ‘aaah, yes they think they are losers. I don’t know if it’s a good word to say. Yes they think they are losers’ (Participant
3). Yet another participant expressed the view that ‘they associate it with laziness like a person who is overweight is lazy and that no one is gonna love you’ (Participant 16). To further elaborate on how obese people were perceived, Participant 17 stated: ‘My peers believe that people that are overweight are untidy and unattractive in a way. Cause people that are overweight eat a lot and it’s very...they say it’s disgusting’. Findings also reveal that it was believed that individuals who are overweight do not care about the health consequences of their weight gain. Participant 15 explained this by stating: ‘Putting on weight is a symbol of causing your own death but slowly, like doing something that is stupid’.

**VIEWS OF THE CAUSES OF OBESITY**

As part of the study, participants’ perceptions of the causes of obesity were explored. The participants gave various reasons for obesity which included poor food choices, overeating, eating to cope with stress and loss, genetic predisposition, lack of exercise and a sedentary lifestyle and a change in environment, as will be discussed next.

**Poor food choices**

Several participants believed that nutritionally poor food choices constituted the main cause for obesity. However, participants had varying views about the reasons for such unsound food choices. Whereas some believed that this was due to carelessness, others viewed it as a result of poverty, and the consequent inability to afford healthy food. The former view is well-illustrated by participant 5, who stated that: ‘And some say people are overweight because they don’t watch what they eat. They eat carelessly’.

**Overeating**

A number of the participants were of the opinion that excess weight gain was caused by having an uncontrolled appetite. In describing the latter, participant 7 mentioned that ‘Not being able to limit yourself as a person cause in most situations people just over eat, that’s how we all are. Even when you’re full, you’re still like I feel like a snack right now’. The participants also mentioned that some people may overeat because they constantly want more and are not satisfied with having just one meal at a time.

**Eating to cope with stress and loss**

A few of the participants believed that stress drove people to eat too much as a means of trying to cope and that this consequently led to weight gain. One participant illustrated this by
stating ‘cause I know I eat when I am stressed. So does my mother so I tend to put on weight when I’m stressed’ (Participant 7). Another related reason would be eating to cope with a loss in an individual’s life. This was demonstrated by one participant’s comments that ‘maybe someone could have passed away. We’ve always found comfort in eating and food’ (Participant 1). The common thread running through these statements is the view that eating constitutes a coping strategy. Typically, the foods that were consumed for these purposes were what are colloquially referred to as ‘comfort food’, which tend to be high in unrefined carbohydrates and unsaturated fats, thus promoting weight gain.

**Genetic predisposition**

A few of the participants mentioned that they believed gaining weight was caused by genetics. In trying to explain this one of the participants stated that she believed she was overweight because her family members were also overweight. She illustrated this by saying ‘Inheritance from within the family. Like my problem with my weight, a lot of people say I’m like this because my mother’s side of the family is like this’. She did not clearly state whether she was referring to genetics or if she viewed her family members as teachers and models of unhealthy behaviour. In making a case for genetics, it was argued by the participants that the weight gain by such individuals was beyond their control. Participant 10 states that ‘It can be something that a person did not ask for, like genetics. You did not choose to have the same genetic make-up as your parents’.

**Lack of exercise and a sedentary lifestyle**

A few of the participants believed that physical inactivity, specifically a lack of exercise; was a precursor to excessive weight gain. They mentioned that exercise was often not a personal priority and this coupled with a sedentary lifestyle contributed to a person’s weight gain. The person who has gained weight might not like exercise because they believe it is too strenuous or might not have the desire to engage in exercising. This view was demonstrated by one participant’s comments that ‘as well as they are not keen on exercising’ (Participant 6). When explaining the idea of a sedentary lifestyle, one participant stated: ‘I mean you can just go in the fridge and get something then throw yourself in the sofa and watch some TV’ (Participant 2).
**Change in environment**

According to four participants, a change in an individual’s environment led to a change in the type of food they consumed, which in turn led to weight gain. These participants believed that when an individual lived with their parents, they were restricted to the food that their parents prepared for them and this food was typically reported to be of high nutritional value. However when they moved to a different place and lived on their own, their food choices were limited by time and financial constraints and as a consequence they chose fast food which was low in nutritional value. Participant 2 reflected on this by stating: ‘We don’t just eat anytime. Like our parents make sure we eat breakfast, lunch and supper. And they make sure the food are the proper food.’ One of these participants described that when a person moves to a different environment than the one they are accustomed to (for instance staying at home with their parents), a change in their eating habits and patterns occurs. This could imply that there is less restriction on what they should eat when they live on their own. Participant 2 explained the former by stating that ‘Maybe let’s say he moved from a different place to another. So the kind of food he was eating before and the amount of food he was eating before has changed. So that can affect a person.’

**CONSEQUENCES OF THE VIEWS**

Participants were asked to share their views on what the consequences of their own views (or those of their peers) about obesity might be. Participants revealed that as a consequence of a person’s weight gain, there was a social stigma that was attached to obesity. They went on to explain that an individual would be mocked and faced possible social discrimination from their peers and community members.

**Social discrimination / mocking**

As discussed by a number of participants, a common notion in their communities is that overweight people do not take part in the activities that everyone else engages in and as a result there is an aspect of social discrimination and exclusion that they face. Participant 2 elaborates on this by saying: ‘That they are going to little discriminate you because if you can look in our community like where I’m from (sic). Most of the people, we play soccer, netball, like we exercise in a lot of different ways. Overweight? How are you going to do that with us? It’s going to be a problem.’ Ultimately, this placed overweight people in a situation where it was an ‘us versus them’ scenario. Furthermore, a few of the participants mentioned
that as a result of the weight gain, people were called names that were derogatory. One of the participants admitted that overweight people suffer stigmatising behaviour, ‘They usually mock them because of their weight, they do not take them seriously’ (Participant 18).

DISCUSSION

The main aim of this study was to explore beliefs and perceptions about obesity among black South African university students using an exploratory qualitative research design, involving 18 black male and female participants. The main themes that emerged from the study suggested that young African adults believed that obesity was a symbol of different things such as affluence and the good life, sexual maturity/fertility and beauty. A strong theme was the reluctance to express opinions about the views on obesity, participants engaged in impression management whereby they gave answers that would make them seem like they were good people. Another theme was the negative connotations that were associated with the characteristics of someone who was overweight. It was believed that obese people were lazy based on their weight gain. The assumed causes for obesity included poor food choices, overeating, eating to cope with stress/loss, genetics, lack of exercise and a change in environment. Participants mentioned the consequences that obese people were faced with because of their weight, these included being socially discriminated against and being mocked.

Findings in the present study show that black students believe that being overweight or obese serves as an indication of a person’s wealth status. It is believed that the person who is overweight has the financial resources to purchase any type of food they desire. The implication is that the individual has the ability to provide for their needs and wants, which stands in contrast with the situation of other less well-off community members, to whom accessibility to different types of food is a luxury that they cannot afford. These views have frequently been noted in previous research among African populations. Waterlow (2013) asserts that in the West African country of Mauritania, being overweight is a sign of wealth and prestige. Women from this country are encouraged to put on extra weight in the hope that they will be able to marry into wealthier families because of the belief that being overweight means there is abundant availability of food in the household and consequently a higher socio-economic status (Waterlow, 2013). Consistent with the findings of the present study, Joubert et al., (2011:367) mention that black South Africans believe that weight gain is a
reflection of prosperity or material and financial wealth. Findings of the current study indicate that the younger generation have informed views of obesity/ being overweight. This could be attributed to the influence of the media and how it is reshaping the way in which African people construct and symbolise obesity. Mungal-Singh (2016) explains that in South African communities, the perceptions of weight and weight loss tend to complicate the issue of obesity as there is a strong cultural belief that gaining weight is a sign of affluence and wealth. When comparing the findings made in the present study about the views of young African adults to those reported in previous studies (which generally involved older adults) the suggestion emerges that there has been a slight generational shift in perspective. This suggests that although students have a higher level of education than participants of previous studies, their perception of obesity being a symbol of affluence is similar to that of the older African generation. This phenomenon can be elucidated by the principles of symbolic interactionism. One of the principles of symbolic interactionism is that people learn meanings that their culture attaches to objects from observing others (Ferrante, 2016:30). It is through our interactions with our peers and family members that shape how we view certain situations. Ritzer (2011:365) mentions that one of the principles of symbolic interactionism is that the capacity for human thought is often shaped by social interaction. The participants’ interactions with members of their peer group and members of their communities form the basis for their socialisation. Ferrante (2008:86) states that socialisation is a lifelong process whereby the younger generation learn beliefs and behaviour characterised by the individual’s adaptation and conformity to social norms. Through their interactions participants learn that being overweight or obese among black South Africans is a symbol of wealth or prosperity. It would appear that the meanings attributed to obesity as symbol have remained fairly stable and that it has for some reason remained resistant to being modified by alternative meanings, as promoted in mainstream Western media (of obesity being undesirable). However it is important to note that there are certain differences in how the younger African generation view obesity/ being overweight. For instance, the younger African generation explains that there are negative ascriptions associated with the character of an obese/ overweight individual whereas the older African generation holds the view that obesity/ being overweight is a positive aspect of an individual’s character. Moreover findings of the current study indicate that the younger people believe that obesity/ being overweight is a result of an individual’s various lifestyle choices.
Findings show hesitation among participants to reveal their thoughts about obesity. As put forward by Sarantakos (2013:255), if there is suspicion that participants are not comfortable in offering direct information about the research questions, an indirect question enables participants to express views which they might not feel comfortable in attributing to themselves. This is evidenced by the participants’ willingness to share their perceptions as it comes from members of their peer group. Another method of explaining the hesitation by participants may be the sociological concept of impression management. Newman (2009:173) states that impression management occurs when someone acts in a way that presents a favourable public image of themselves so that others will have a positive judgement about them. Ferrante (2008:131) asserts that people tend to use impression management so that they are able to achieve a favourable social outcome. In light of the present study, findings imply that it is more important to maintain the perception that one is a good person by avoiding statements that are deemed inflammatory or biased than being truthful and possibly being seen as a ‘bad’ person. If a person reveals unacceptable or inappropriate information about themselves, they risk offending another person. Ferrante (2006:157) states that most people assess the risk-benefit ratio when they are engaging with others. They compare the costs of losing their audience or losing their integrity (Ferrante, 2006:157). When people take part in front stage behaviour, it is a reflection of their internalised expectations and norms. The image that someone is a good person is preserved when an individual does not say something that could be seen as offensive to those who are listening, as seem to have been the case when these participants shared their views of obese individuals.

The findings suggest that there are contrary perceptions on obesity as a symbol of beauty. On the one hand being obese in the African context means that you are beautiful and attractive. On the other hand, from a western perspective, being obese is equated to being unattractive. These contrary findings suggest that the younger generation are changing how they view obesity when compared to older African people. This implies that the influence of the media has played a role in reshaping how younger African people construct and symbolise obesity but this process is still in transition, resulting in a degree of inner ambiguity and confusion.

The findings of the current study suggest that it is believed that when women gain weight, it is an indication of their sexual maturity and fertility. This theme is echoed by findings from a study by Adeboye, Bermano and Rolland (2012:517) who reveal that prior to getting married,
women are stuffed with food for potential husbands as being overweight is regarded as a symbol of beauty and fertility. Ogana and Ojong (2012:32) mention that despite the known negative health consequences of overweight and obesity, the notion that plump women are beautiful and fertile is still rife among the isiZulu speaking women in contemporary Kwazulu-Natal. The findings of the current study are similar to the latter as evidenced by the suggestion that women who are not overweight are not fertile or sexually mature. Framing this finding by means of a symbolic interactionist perspective suggests that socio-culturally constructed meanings of obesity representing a symbol of sexual maturity and fertility do still continue to hold sway in at least some African communities. However, given that only one participant mentioned this view, the suggestion is that such a conceptualization might not be very prevalent or salient among the younger generation (at least as far as the participant group is concerned). Additional research would therefore be required to explore this specific aspect of obesity.

The findings also reveal that it is often assumed that being overweight or obese is a reflection of the individual’s laziness. This stems from the idea that someone who is overweight is neglectful about their appearance. There are preconceived ideas, traits and characteristics associated with the individual carried within the given title. Participants stated that the idea that an obese person possesses certain unfavourable characteristics make the obese person more susceptible to name calling. This is evidenced by findings that reveal that obese people are named losers and called unlovable. From a sociological perspective, this represents a process of labelling, which Garcia (2013:3) defines as a situation where someone is given a title that they have not chosen for themselves. Labelling has been found to negatively affect people’s self-esteem (Heuer & Puhl, 2010:1020) and might lead an individual to suffer damage to their self-worth as a result of being labelled as losers. Heuer and Puhl (2010:1019) point out that these negative labels further perpetuate the idea that weight stigmatisation is justifiable and may be used as a tool to motivate obese people to choose healthier lifestyles.

The present study’s findings indicate that overeating and poor food choices were some of the factors that were believed to contribute to weight gain and obesity. Participants implied that people tend to overeat because they are slaves to their desires which they are unable to regulate. In other instances people were believed to choose food that is poor in nutritional value and high in fat content. Existing studies support such claims. In this regard SA Health (2012) states that eating excessive types of food and drink, which are low in fibre or high in
fat, salt and sugar may lead to health problems such as overweight and obesity. In their study, Ogana and Ojong (2012:40) reveal that the perception that obesity among the black South African communities is caused by an increased consumption of unhealthy foodstuffs and by dietary habits such as the culture of overeating.

Another cause to which obesity was attributed to by the participants is genetic predisposition. Boutin and Froguel (2001:395) refute this claim by pointing out that a multitude of investigated genes failed to give conclusive and explicit evidence of any involvement of genetic susceptibility to obesity. One reason is that not enough is known about the molecular mechanisms of energy balance (Boutin & Froguel, 2001:395). However, recent discoveries reveal that genetically, people differ in their perceptions of hunger and satiety and susceptible subgroups of the population may be in danger of being obese in obesogenic environments with unlimited access to food (Choquet & Meyre, 2011:174). This is similar to one of the findings that suggest that overeating is a result of unlimited access to food.

Findings also suggest that obesity was viewed as being caused by a sedentary lifestyle and lack of exercise. The National Heart, Lung and Blood Institute (2012) claims that there is a strong link between regularly spending more than 2 hours a day watching TV and being overweight and obese. This highlights the cause and effect of not exercising coupled with a sedentary lifestyle. Balentine (2016) asserts that individuals who do not exercise and lead a sedentary lifestyle burn fewer calories than people who are active.

Another finding reveals that obesity is believed to be caused by a change in environment. In some cases the new environment that people find themselves in does not support a healthy lifestyle. Jebb (2014:41) explains this change means more dependence on convenient food and more food eaten outside the home; this type of food is often higher in fat and sugar than home-made meals. Moving from one place to another introduces an individual to a different way of doing things. When people move, their constructions of what constitutes the way to eat might change, resulting in different eating habits which then affect weight.

In addition to exploring views of obesity and its causes, participants were also asked about their opinion of the consequences of these views. The participants reported that an element of social discrimination is apparent in black communities. It was suggested that as a result of being overweight, individuals are excluded from communal activities that enhance social cohesion. The implication of this exclusion is that an in-group versus out-group situation
takes place. Mondal (2016) explains that one of the characteristics of the in-group is the ‘we-feeling’; people in the ‘in-group’s group have a strong sense of a ‘we’ feeling which differentiates them from other people who have been relegated to the ‘out-group’. In contrast, the out-group is characterised by the antagonism and enmity they receive from the members of the in-group. One of the social implications of being overweight or being obese is that people of the in-group do not want to be associated with someone they see as part of the out-group. The latter may also be seen as ‘othering’. Brons (2015:70) explains that ‘othering’ is a process that categorises those that are thought to be dissimilar from ordinary individuals. Consequently this can strengthen and replicate positions of power and subservience among different individuals (Brons, 2015:70). The socially constructed meanings about obese people place them in a situation whereby they do not fit in to what is seen as socially acceptable. As a result, they face social exclusion because they are outside the scope of what is viewed as tolerable. Aryeetey (2016:5) reveals that overweight people do not have an active social life because they avoid going to public places. This corroborates the findings of the current study which imply that overweight people may avoid interaction with community members because of the fear of being judged or mocked. The findings reveal that the mocking makes it difficult for overweight individuals to express themselves as a result of being treated like they are not important.

**Limitations of the study**

As is the case with all academic research, this study is not without its limitations. The degree to which the findings made here can be transferred is restricted as the study was conducted in one University among students from two language groups. Although the findings might likely transfer to students elsewhere sharing similar socio-demographic characteristics, additional research would be required to explore whether the themes found here also apply to young African adults in other contexts.

Attaining the mandatory number of participants to achieve data saturation was challenging because of the number of participants that were available to be interviewed. Another limitation was that participants sometimes gave socially desirable rather than honest responses. This can be best explained by the impression management theory which states sometimes people acts in a way that presents a favourable public image of themselves so that others will have a positive judgement about them and their character (Newman, 2009:173). Participants of the current study may have not provided their full or honest perceptions about
obesity, which might influence the credibility of the findings. However, by making use of indirect questioning, asking participants about how their peers view obesity and obese individuals, this limitation has hopefully been addressed to some extent.

**Recommendations**

The findings obtained in this study are merely a representation of the beliefs and perceptions of black South African university students enrolled at only one university. Therefore it is recommended that the study be investigated in other universities across South Africa with students of different African cultural groups to get a fuller picture of African university students’ beliefs and perceptions about obesity and also compare the results with that of students of the current study. Using larger scale quantitative surveys would help quantify and generalise the nature and prevalence of these views among diverse ethnic groups.

**Implications for theory**

The current study helps to add to the knowledge gap regarding the beliefs and perceptions of obesity among black South African university students. It sheds light on the impact these views might have intervention strategies.

**Implications for practice**

Health promotion interventions need to focus on investigating the socio-cultural context of how obesity is viewed. This includes investigating how and why ethnic perceptions of obesity have remained resistant against westernised ideas of obesity.

**CONCLUSION**

The study adds on to our knowledge of the beliefs and perceptions about obesity among black South African university students. Previous studies have shown that despite awareness about the risks associated with being obese, the beliefs and perceptions of black South Africans generally tend to view obesity in a positive light. This is often because of the belief that being obese is a symbol of health and wealth. The stigma attached to HIV heightens the notion that being overweight is a sign that one is HIV positive. These and many other misperceptions on obesity necessitate that before the implementation of any health promotion strategies, one needs to investigate the socio-cultural context of how obesity is understood. In light of the findings of the current study’s findings, it is interesting to note that some of the perceptions
of obesity have not significantly changed when compared to the findings of previous studies. There is still a belief among the younger generation of the black population that obesity has positive implications such as the view that being obese means that you are wealthy or prosperous. The idea that obesity is a representation of wealth is similar to findings of previous studies and suggests that the younger generation have held on to their socially constructed ideas about the relationship between wealth and obesity. This suggests that the conceptualisations of obesity as a symbol of wealth need to be investigated in order to explain their immunity against alternate conceptualisations projected in western media. The ambiguity and confusion of the younger generations’ construction of obesity as a symbol of beauty implies that there is a generational shift in perspective in terms of how obesity is viewed and conceptualised.
REFERENCES


SA Health. 2012. The risks of poor nutrition


CHAPTER 3

CONCLUSIONS, LIMITATIONS, AND RECOMMENDATIONS

This chapter presents the conclusions of the study according to the general and specific objectives that were outlined in chapter 1. The limitations of this research are discussed and recommendations are made for future research.

3.1 Conclusions

The general aim of this study was to explore the beliefs and perceptions about obesity among black South African university students. With the high prevalence of obesity in South Africa, it is important to investigate the factors that are the driving force behind this trend. Despite various educational and health promoting campaigns, obesity rates have not decreased. One study set out to investigate the distribution of obesity by age and gender. Moraba, Motaung and Sengwayo (2012:47) divulge that women have a higher obesity prevalence than men. Devanathan, Esterhuizen and Govender (2013:2) indicate that women’s perception of their body image is one of the determinants of the obesity rates. Prior studies reveal that a significant number of black South Africans preferred a large body because of the positive inferences associated with it (Devanathan et al., 2013:2). Black South Africans tend to associate being overweight with being affluent and not having illnesses such as HIV. As a result of the latter, the notion that being overweight is desirable may be related to the AIDS epidemic, with a perception that thinness is associated with an HIV-positive status (Devanathan et al., 2013:2). However, only a handful of researchers take an in-depth look into the ethnic and cultural factors associated with obesity; and those who do mention such factors tend to do so quantitatively. Main stream studies that investigate the perceptions and beliefs of black South Africans with regard to obesity focus on adult views. This necessitated a study that explored the beliefs and perceptions about obesity among a younger group of black South Africans. Such a study would be significant as it would reveal whether there had been changes in attitude as a result of the increasing westernisation and reveal if any generational shifts in perspective exist.

In light of these gaps, the following research aims were formulated to guide the study:

- To explore beliefs and perceptions about obesity among black South African university students.
To conduct a literature review of research dealing with the beliefs and perceptions of obesity among black South Africans.

An exploratory qualitative research design was used to gather data for this study. A qualitative approach is relevant to this study because of the fact that its focus is on interpretation of phenomena in the participants’ natural settings and the meanings that participants carry into these settings. This approach was chosen because the researcher wanted to explore the deep seated beliefs and perceptions that were related to overweight and obesity, which are subjective phenomena that lend themselves to qualitative exploration. Purposive sampling was used to acquire participants. Participants were students enrolled in first, second, and third year classes at North-West University Vaal Triangle Campus. Quota sampling was used as additional strategy to ensure that an equal number of male and female participants were present in the sample to ensure that views of both genders were reflected in the data. Data was gathered by means of semi-structured interviews. In light of the present study, semi-structured interviews were deemed suitable because it essentially allowed participants the freedom to express their opinions in their own terms. All interviews were audio recorded with the permission of the participants. Following this, the interviews were transcribed verbatim, and the transcripts were prepared for analysis. Data were analysed by means of thematic content analysis, which is a process that entails creating themes and concepts. These themes are expanded within the context of the findings. The researcher has to code the data acquired from the semi-structured interviews. The researcher tells a story about the participants’ experiences, interactions and words through the themes and concepts. Corbin and Strauss (2008:57) explain that the data analysis process requires reviewing data for further themes or concepts until no further themes and concepts can be found.

The current study was guided by the symbolic interactionist theoretical framework. Symbolic interactionism is a paradigm which holds the notion that human behaviour involves the creation of meaning through social interactions, with those meanings conditioning ensuing interactions (Babbie, 2013:62). Belgrave and Charmaz (2013:13) remark that this perspective accepts that society and collective life lead the individual and form contexts for action and explanation. The symbolic interactionist theory emphasises the shared meanings through a process of interaction centering on various symbols, which are defined as words, objects, feelings that people attach meanings to (Ferrante, 2008:30). Symbolic interactionist theory is
focused on the way people make sense of the world they live in, their experiences and definition of what they are doing and what others are doing, lastly the way in which they influence and are also influenced by others. It is also concerned with the manner in which the self develops; the way people attach meanings to their actions and also the actions of others, the way people learn these meanings and the way these meanings evolve (Ferrante, 2006:49). Symbolic interactionists also focus on individuals and their relationships with one another. They point out that people learn meanings from one another and that they organise their lives according to those meanings (Ferrante, 2006:50). Symbols are seen as playing a fundamental role in social interaction.

Using thematic content analysis, three main themes were derived from the data. These suggest that young African adults’ views of obesity could be allocated to three broad categories: the views of obesity/obese persons, views about the causes of obesity, and opinions about the consequences of the views of obesity/obese person. One of the findings that emerged in relation to participants’ views of obesity was a degree of ambivalence between traditional African notions of obesity as a symbol of beauty, and modern Western views of obesity as being unappealing. The findings reveal that obesity was generally regarded by the participants as a symbol of wealth and prosperity while in some instances, participants appeared to be engaging in impression management as they were reluctant to express views. Findings indicate that number of negative ascriptions were given to the obese person and resulted in a form of name calling. Yet another finding shows that obesity is seen as a sign of a woman being sexually mature and/or fertile. Findings reveal that there are various perceived causes of obesity which included poor food choices, overeating, eating to cope with stress and loss, genetic predisposition, lack of exercise and a sedentary lifestyle and a change in environment. The consequences of those views include social discrimination and mocking. Obese people are excluded from activities that their community members engage in and puts them in an us versus them situation.

Findings of the current study indicate that participants strongly believed that obesity was a symbol of living the good life and an indication that an individual is affluent. Based on the participants’ responses, this notion was also prevalent among their peers from their various communities. This is similar to findings from previous studies which indicate that obesity in black South African communities is regarded as representing wealth and prosperity. Grant,
Rossouw and Viljoen (2012:5) elaborate on the latter by stating that in certain African cultures, being overweight is seen as an indication of wealth. In African marriages, if a woman does not gain weight, this is acknowledged as a sign of financial weakness of the husband. Aryeetey (2016:4) explains that in African cultures, the expectation that a wife should gain weight as a symbol of her husband’s financial prowess. If an individual is able to provide for basic needs, they are socially accepted among the members of their community.

Findings also indicate that a number of participants were reluctant to express their opinion about obesity as a result of the fear of appearing to be judgemental. This suggests a form of impression management from the participants’ side. Based on the participants’ responses, the implication is that there is constant conflict between being who they truly are and who they appear to be. Participants seem to have definite views of obesity but they are weary of expressing them in order to keep up appearances. People avoid giving out an opinion that might seem like it is inflammatory or politically incorrect because if they reveal something that is unacceptable, they risk offending the other person (Ferrante, 2006:157). If one suggests that being overweight or obese should be viewed in a negative light and frowned upon, it may offend the next person. This can negatively impact on the social relations between these two individuals. The obese individual is treated as a social outcast.

The findings reveal that there are two competing perceptions on obesity as a symbol of beauty. From the African perspective, being obese suggests that you are attractive and beautiful. Whereas from a western perspective, being obese suggests that you are unattractive and not beautiful. These contrary findings suggest that the younger generation are changing how they view obesity when compared to how their older counterparts see obesity. It is implied that the influence of the media is restructuring how younger African people construct and symbolise obesity but this process is still in transition, resulting in a degree of inner ambiguity and confusion.

The findings of the current study suggest that it is believed that when women gain weight, it is an indication of their sexual maturity and fertility. This theme is echoed by findings from a study by Adeboye et al. (2012:517) who reveals that prior to getting married, women are stuffed with food for potential husbands as being overweight is regarded as a symbol of beauty and fertility. Ogana and Ojong (2012:32) mention that despite the known negative health consequences of overweight and obesity, the notion that plump women are beautiful
and fertile is still rife among the isiZulu speaking women in contemporary Kwazulu-Natal. The findings of the current study are similar to the latter as evidenced by the suggestion that women who are not overweight are not fertile or sexually mature. Framing this finding by means of a symbolic interactionist perspective suggests that socio-culturally constructed meanings of obesity representing a symbol of sexual maturity and fertility do still continue to hold sway in at least some African communities. However, given that only one participant mentioned this view, the suggestion is that such a conceptualization might not be very prevalent or salient among the younger generation (at least as far as the participant group is concerned). Additional research would therefore be required to explore this specific aspect of obesity.

The findings also reveal that it is often assumed that being overweight or obese is a reflection of the individual’s laziness. This stems from the idea that someone who is overweight is neglectful about their appearance. There are preconceived ideas, traits and characteristics associated with the individual carried within the given title. Participants stated that the idea that an obese person possesses certain unfavourable characteristics make the obese person more susceptible to name calling. This is evidenced by findings that reveal that obese people are named losers and called unlovable. From a sociological perspective, this represents a process of labelling, which Garcia (2013:3) defines as a situation where someone is given a title that they have not chosen for themselves. Labelling has been found to negatively affect people’s self-esteem (Heuer & Puhl, 2010:1020) and might lead an individual to suffer damage to their self-worth as a result of being labelled as losers. Heuer and Puhl (2010:1019) point out that these negative labels further perpetuate the idea that weight stigmatisation is justifiable and may be used as a tool to motivate obese people to choose healthier lifestyles.

The present study’s findings indicate that overeating and poor food choices were some of the factors that were believed to contribute to weight gain and obesity. Participants implied that people tend to overeat because they are slaves to their desires which they are unable to regulate. In other instances people were believed to choose food that is poor in nutritional value and high in fat content. Existing studies support such claims. In this regard SA Health (2012) states that eating excessive types of food and drink, which are low in fibre or high in fat, salt and sugar may lead to health problems such as overweight and obesity. In their study, Ogana and Ojong (2012:40) reveal that the perception that obesity among the black South
African communities is caused by an increased consumption of unhealthy foodstuffs and by dietary habits such as the culture of overeating.

Another cause to which obesity was attributed to by the participants is genetic predisposition. Boutin and Froguel (2001:395) refute this claim by pointing out that a multitude of investigated genes failed to give conclusive and explicit evidence of any involvement of genetic susceptibility to obesity. One reason is that not enough is known about the molecular mechanisms of energy balance (Boutin & Froguel, 2001:395). However, recent discoveries reveal that genetically, people differ in their perceptions of hunger and satiety and susceptible subgroups of the population may be in danger of being obese in obesogenic environments with unlimited access to food (Choquet & Meyre, 2011:174). This is similar to one of the findings that implies that overeating is a result of unlimited access to food.

Findings also suggest that obesity was viewed as being caused by a sedentary lifestyle and lack of exercise. The National Heart, Lung and Blood Institute (2012) claims that a large number of people spend hours in front of TVs and computers doing work and schoolwork. They claim that there is a strong link between regularly spending more than 2 hours a day watching TV and being overweight and obese (NHLBI, 2012). This highlights the cause and effect of not exercising coupled with a sedentary lifestyle. Balentine (2016) asserts that individuals who do not exercise and lead a sedentary lifestyle burn fewer calories than people who are active.

Another finding reveals that obesity is believed to be caused by a change in environment. In some cases the new environment that people find themselves in does not support a healthy lifestyle. Moving from one place to another introduces an individual to a different way of doing things. When people move, their creations of what constitutes the way to eat might change, resulting in different eating habits which then affect weight.

In addition to exploring views of obesity and its causes, participants were also asked about their opinion of the consequences of these views. The participants reported that an element of social discrimination is apparent in black communities. It was suggested that as a result of being overweight, individuals are excluded from communal activities that enhance social cohesion. The implication of this exclusion is that an in-group versus out-group situation
takes place. Mondal (2016) explains that one of the characteristics of the in-group is the ‘we-feeling’; people in the ‘in-group’s group have a strong sense of a ‘we’ feeling which differentiates them from other people who have been relegated to the ‘out-group’. In contrast, the out-group is characterised by the antagonism and enmity they receive from the members of the in-group. One of the social implications of being overweight or being obese is that people of the in-group do not want to be connected to someone they see as part of the out-group. The latter may also be seen as ‘othering’. Brons (2015:70) explains that ‘othering’ is a process that categorises those that are thought to be dissimilar from ordinary individuals. Consequently this can strengthen and replicate positions of power and subservience among different individuals (Brons, 2015:70). The socially constructed meanings about obese people place them in a situation whereby they do not fit in to what is seen as socially acceptable. As a result, they face social exclusion because they are outside the scope of what is viewed as tolerable. Aryeetey (2016:5) reveals that overweight people do not have an active social life because they avoid going to public places. This corroborates the findings of the current study which imply that overweight people may avoid interaction with community members because of the fear of being judged or mocked. The findings reveal that the mocking makes it difficult for overweight individuals to express themselves as a result of being treated like they are not important.

Another frequently mentioned cause for obesity that emerged from the interviews was that individuals tend to be negligent about what they consume. Participants were of the opinion that poor food choices and overeating led to one putting on excessive weight. Ogana and Ojong (2012:40) suggest that among the black South African communities there is a culture of overeating which involves an increased consumption of unhealthy food. Goedecke and Jennings (2005:547) state that a review of the ‘nutrition transition’ in the black population in South Africa revealed that although the food diets met sensible dietary guidelines, there was a general tendency for an increase in fat intake and a decrease in carbohydrate intake in both rural and urban areas. In an attempt to identify the causes of obesity, Prentice (2006:97) mentions that the structure and composition of the diets of all nations and physical activity patterns across the globe are rapidly changing. When referring to the structure and composition of the diets of all nations, we are referring to issues such as the world’s food supply and diets being sweetened and the edible oil intake growing very rapidly chiefly in Asia, the Middle East and Africa (Prentice, 2006:97). There is a commonly held belief among
black South Africans that healthy food is expensive and as a result, people opt for food that is cheaper such as bunny chows, fat cakes and fizzy drinks.

However, somewhat contrary to the previous theme, was the finding that some participants believed that being obese is a reflection of the individual’s sedentary lifestyle and lack of exercise. Prentice (2006:97) attributes this to the changes found in the society we live in. The change to service sector occupations from agriculture and other forms of occupations that require individuals to use a vast amount of energy have transformed physical activity patterns; these new occupations require less physical activity (Prentice, 2006:97). Moreover Prentice (2006:97) claims that the changes in the types of transport we use and our leisure activity patterns gravitate towards reduced energy expenditure and the modernisation of all home production related activities. Some students live on campus and sometimes find themselves in situations whereby the only type of physical activity they take part in is walking to the lecture room halls and back to their rooms. This also implies that participants do not partake in activities that could enhance social cohesion and connectedness.

Findings revealed that genetics were believed to be among the causes of excessive weight gain and obesity. This is supported by the Centers for Disease Control and Prevention (2010) as it asserts that the thrifty genotype is just part of a wider scale of ways in which genes can favour fat accumulation in a given environment. Speakman (2008:1612) states that the term thrifty genotype is used to explain a phenotype that is remarkably efficient in the intake and utilisation of food. Accordingly this includes the drive to overeat which involves poor regulation of appetite and satiety; the tendency to be sedentary referring to being physically inactive; a weakened ability to use dietary fats as fuel and an enlarged, easily stimulated ability to store body fat (CDC, 2010).

Participants expressed that eating in response to negative emotions was quite common. As students who sometimes find themselves under pressure with their studies, they were reported to use eating as a coping mechanism to deal with their stress. Over time, this resulted in the individuals gaining excessive weight.

Findings show that there was a belief that a degree of social stigma was a consequence of excessive weight gain. Cockerham (2012:189) outlines three main types of stigma:
abominations of the body, blemishes of the individual character and tribal stigmas of issues such as race and nationality. Abominations of the body can include but are not limited to gigantism, dwarfism or even vitiligo. Blemishes of the individual character include addiction, homosexuality and suicidal behaviour. Tribal stigmas occur when there are individuals who portray negative characteristics from the majority and they are therefore subjected to discrimination (UNAIDS, 2005). Obesity can be included in the first and second types of stigma: abomination of the body and blemishes of the individual character. In such instances, a person’s body weight becomes a moral issue. Malterud and Ulriksen (2011:8404) explain that stigma is more than the interchange of social power. Stigmatisation is connected to the disputing stereotypes mediated by the cultural discourse and to the response of oppressive messages by the affected individuals (Malterud & Ulriksen (2011:8404). Participants of the present study explained that an individual would be mocked, branded as lazy or as a ‘loser’, and faced possible social discrimination from their peers and community members. They are isolated from activities that the other community members take part in because of the labelling that accompanies how their size is viewed.

3.2 Limitations of the Study

No study is devoid of limitations, and the present study is no exception. In particular, the extent to which the findings made here can be transferred is limited as the study was conducted in one University among mostly Sesotho and isiZulu speaking students. Whilst the findings might likely transfer to students elsewhere sharing similar socio-demographic characteristics, additional research would be required to explore whether the themes found here also apply to young African adults in other contexts. Obtaining the required number of participants to achieve data saturation was challenging because of the number of participants that were available to be interviewed. A large number of those who showed initial interest in the study did not have the time to sit down for interviews or they lost interest when it was explained that there would be no monetary gain for participating in the study. The latter was a positive outcome as the participants who went through with the interviews knew there was no financial gain and did not manipulate their responses for such gains. Another limitation was that participants sometimes seemed to engage in impression management and gave socially desirable rather than authentically felt responses. Newman (2009:173) explains that impression management occurs when someone acts in a way that
presents a favourable public image of themselves so that others will have a positive judgement about them and their character. In light of the current study’s findings, participants may have not provided their full or honest views about obesity, which might influence the credibility of the findings. However, this was also anticipated, and using indirect questioning (e.g. by asking participants what their friends say about obesity and obese people) this limitation was hopefully circumvented to some extent as this type of questioning was productive of what appeared to be more candid views.

3.3 Implications

A review of literature revealed very few studies that set out to address the beliefs and perceptions about obesity among a younger black population. Therefore this study was conducted with the purpose of exploring beliefs and perceptions about obesity among black South African university students. This study was also conducted to help bridge the current knowledge gap that exists from the limited literature on the topic.

People’s perceptions and views are shaped by their interactions with others within their social groups and this may possibly lead them to engage in unhealthy lifestyle practices in order to be seen as attractive. As such, interventions need to take cognisance of the powerful effect of the importance of peer views, suggesting a need for broad/group based educational or other interventions. This may indicate the significance of group education in assessing and encouraging health changing beliefs and attitudes.

A variety of views about obesity and obese people and that whilst these mostly echo those reported in previous studies in relation to older adults, there are indications of a few differences. Most notably young African people seem somewhat ambivalent about whether to regard obesity as symbol of beauty (as dictated by traditional African conceptions) or as a symbol of unattractiveness (as presented in Western contemporary culture and media).

Another implication is that many of these views and beliefs may have the unintended consequence of sustaining and promoting unhealthy dietary and lifestyle practices, such as overeating or eating unhealthy foods in order to gain weight in order to give the impression of living the good life, and being attractive to the opposite sex. A consequence of the above is that any obesity management or intervention programs are likely to be ineffective unless cognizance is taken about the important role played by culture and cultural beliefs in relation to obesity.


3.4 Recommendations for future research

The findings obtained in this study represent the beliefs and perceptions of black South African university students enrolled at the Vaal Triangle Campus of the North-West University. It is recommended that this study be conducted in other universities across South Africa to obtain a more inclusive sample of university students’ beliefs and perceptions about obesity and also compare the results with that of students of the current study. This can be accomplished by conducting larger scale quantitative surveys that make it possible to effectively quantify and generalise the nature and prevalence of these views among different gender and cultural groups.

Another recommendation for future research would be to explore how and why the traditional conceptualisations of obesity as symbol of wealth are so resistant to modification in the context of such prominent Western counter-conceptualizations of obesity as being unhealthy and socially undesirable. Such a study would be significant as it would possibly reveal why the view of obesity among black South African youth has been able to remain immune against the alternative conceptualisations portrayed in western media.

The current study did not investigate whether the participants’ responses were based on personal experiences of being obese. In the present study most participants were not obese, and were merely asked about their own and their peers’ views of obesity. Future studies should focus on investigating the experiences of being overweight or obese among South African university students as they are in a better position to discuss issues such as stigmatisation and labelling of obese people.

3.5 Chapter Summary

The chapter offers a conclusion to the current study by providing an outline of the limitations, implications and recommendations associated with the study. The most important findings drawn from the research study were discussed in this chapter. Limitations that arose during the research process were discussed next, followed by the implications of the study, as well as recommendations for future research on the topic.
REFERENCES


SA Health. 2012. The risks of poor nutrition


PARTICIPANT INFORMATION LEAFLET AND CONSENT FORM FOR

TITLE OF THE RESEARCH PROJECT: Exploring beliefs and perceptions about obesity among black South Africans in university

REFERENCE NUMBERS:

PRINCIPAL INVESTIGATOR: Kagisho Phajane

ADDRESS: 26852 Goedehoop Street Vistapark Bloemfontein

CONTACT NUMBER: 0784701897

You are being invited to take part in a research project that forms part of my master’s mini-dissertation. Please take some time to read the information presented here, which will explain the details of this project. Please ask the researcher any questions about any part of this project that you do not fully understand. It is very important that you are fully satisfied that you clearly understand what this research is about and how you could be involved. Also, your participation is **entirely voluntary** and you are free to decline to participate. If you say no, this will not affect you negatively in any way whatsoever. You are also free to withdraw from the study at any point, even if you do agree to take part.

This study has been approved by the Humanities and Health Research Ethics Committee (HHREC) of the Faculty of Humanities of the North-West University (NWU…….) and will be conducted according to the ethical guidelines and principles of the international
Declaration of Helsinki and the ethical guidelines of the National Health Research Ethics Council. It might be necessary for the research ethics committee members or relevant authorities to inspect the research records to make sure that we (the researchers) are conducting research in an ethical manner.

**What is this research study all about?**

- This study will be conducted in a small private conference room on campus and will involve in-depth interviews. The researcher has been trained to do such interviews.
- Around 16 participants will be included in this study (though more people might be asked to take part in the study if the researcher feels this is necessary).
- The objectives of this research are: to qualitatively investigate the beliefs and perceptions about obesity among black South Africans in university. Most studies that were done on this topic in the past only focused on adult views. Therefore it is important that the views of a younger age group, such as undergraduate university students, are investigated.

**Why have you been invited to participate?**

- You have been invited to participate because you are a black student between the ages of 18 and 24.
- You have also complied with the following inclusion criteria, in that you are:
  - a full time student enrolled at a South African university
  - black
  - between the ages of 18 and 24
- You will be excluded if:
  - You are not a full time student
  - younger than 18 years, or older than 26 years

**What will your responsibilities be?**

- You will be expected to answer the questions as truthfully as you can during the interview. There will be a series of two or three interviews (lasting more or less one hour) with each participant that will be spaced a week apart. You have the right to refuse to participate in the study or answer any questions you are uncomfortable with. Even if you consent to the first interview, you still have the right to refuse any additional interviews if you only wish to engage in a single interview. To make sure that the findings are reliable, you may be asked to provide feedback on the results of the data analysis.

**Will you benefit from taking part in this research?**

- Your participation will hold no direct benefits for you.
- The findings would be of theoretical interest to those who are involved in obesity prevention and management programs as an improved understanding of beliefs and perceptions related to obesity among black South African university students will assist individuals who are interested in exploring obesity from a cultural viewpoint. Moreover academics in the field of Sociology and Health will be interested in the outcomes of this research.
Are there risks involved in your taking part in this research and how will these be managed?

➢ *It is not expected that your participation in this study will involve any risk. However, if the issue of weight and/or obesity is a highly sensitive one for you (and you will only be asked to answer general questions about this topic, not personal ones that relate to your own weight), and if you would not feel comfortable talking about this then the study might cause you to experience some uncomfortable feelings. Of course, if this is the case, you are free to either say no to participating in the study, or to withdraw from the interview any time you feel like doing so.*

➢ *As far as the researcher can state, it is unlikely that this study will produce any emotional distress, personal or cultural embarrassment, breach of confidentiality, economic harm, legal jeopardy, physical pain or injury to the participants, the researcher or gatekeeper.*

Who will have access to the data?

➢ *Anonymity (that is, in no way will your results be linked to your identity) will be maintained by assigning a number to each person who takes part in the study (example “P1”). Confidentiality (that is, I/we assure you that we will protect the information we have about you) will be ensured by not using the participants’ names in any written material that contains the research or in any discussions of the research project. Moreover, all the interview material will be stored in a safe place that no one (apart from the researchers) can access. Reporting of findings will be anonymous by using the numbers assigned to the participants.*

➢ *Only the researcher and the research supervisor will have access to the data. Data will be kept safe and secure by locking hard copies in locked cupboards in the researcher’s office and for electronic data it will be password protected.*

➢ *Audio-recorded data will be transcribed by the researcher. As soon as data has been transcribed it will be deleted from the recorders. The transcripts will be stored on a password-protected computer.*

➢ *Data will be stored for 5 years in a locked cupboard in a private office.*

What will happen to the data?

The data from this study will be reported in the following ways: The data will be used as part of a mini-dissertation. In all of this reporting, you will not be personally identified. This means that the reporting will not include your name or details that will help others to know that you participated (e.g., your address or your student number).

The data could be used in future studies for a purpose that is the same or very similar to that of the present study (exploring perceptions and beliefs about obesity), but will not be used for any other purpose/s than this.

Will you be paid/compensated to take part in this study and are there any costs involved?

No you will not be paid/compensated to take part in the study, but light refreshments will be provided.
How will you know about the findings?
➢ The general findings of the research will be shared with you by the researcher if you would want to know what the findings were.

Is there anything else that you should know or do?
➢ You can contact the researcher, Kagisho Phajane, at 0784701897 if you have any further queries or encounter any problems.
➢ You can contact the chair of the Humanities and Health Research Ethics Committee (Prof Linda Theron) at 016 910 3076 or Linda.theron@nwu.ac.za if you have any concerns or complaints that have not been adequately addressed by the researcher. You can also contact, the co-chair, Prof Tumi Khumalo (016 910 3397 or Tumi.khumalo@nwu.ac.za). You can leave a message for either Linda or Tumi with Ms Daleen Claasens (016 910 30441)
➢ You will receive a copy of this information and consent form for your own records.

Declaration by participant

By signing below, I …………………………………..…………. agree to take part in a research study entitled:

I declare that:

• I have read and understood this information and consent form and it is written in a language with which I am fluent and comfortable.
• I have had a chance to ask questions to both the person obtaining consent, as well as the researcher (if this is a different person), and all my questions have been adequately answered.
• I understand that taking part in this study is voluntary and I have not been pressurised to take part.
• I understand that what I contribute (what I report/say) could be reproduced publically and/or quoted, but without reference to my personal identity.
• I may choose to leave the study at any time and will not be penalised or prejudiced in any way.

Signed at (place) ........................................... on (date) ....................... 20....

................................................................. .................................
Signature of participant  Signature of witness

• You may contact me again □ Yes □ No
• I would like a summary of the findings of this research □ Yes □ No

The best way to reach me is:
Name & Surname: _______________________________________________
Postal Address: __________________________________________________
Email: ________________________________________________________
Phone Number: ________________________
Cell Phone Number: ________________________
In case the above details change, please contact the following person who knows me well and who does not live with me and who will help you to contact me:
Name & Surname: _______________________________________________________
Phone/ Cell Phone Number /Email: _______________________________________

Declaration by person obtaining consent

I (name) ………………………………………………………………… declare that:

- I explained the information in this document to …………………………………….
- I encouraged him/her to ask questions and took adequate time to answer them.
- I am satisfied that he/she adequately understands all aspects of the research, as discussed above
- I did/did not use a interpreter.

Signed at (place) .................................................. on (date) .................... 20....

...............................................................................................  ........................................
Signature of person obtaining consent       Signature of witness

Declaration by researcher

I (name) ………………………………………………………………… declare that:

- I explained the information in this document to …………………………………….
- I encouraged him/her to ask questions and took adequate time to answer them.
- I am satisfied that he/she adequately understands all aspects of the research, as discussed above
- I did/did not use a interpreter.
Signed at (place) .................................................. on (date) .................... 20....

...............................................................................................  ........................................
Signature of researcher       Signature of witness
ETHICS APPROVAL CERTIFICATE OF PROJECT

Based on approval by Humanities and Health Research Ethics Committee (HHREC), the North-West University Institutional Research Ethics Regulatory Committee (NWU-IRERC) hereby approves your project as indicated below. This implies that the NWU-IRERC grants its permission that, provided the special conditions specified below are met and pending any other authorisation that may be necessary, the project may be initiated, using the ethics number below.

**Project title:** Exploring beliefs and perceptions about obesity among black South African university students.

**Project Leader:** Dr HW Nell  
**Student:** KK Phajane

<table>
<thead>
<tr>
<th>Ethics number:</th>
<th>N W U - HS - 2 0 1 5 - 0 1 0 3</th>
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<tbody>
<tr>
<td><strong>Status:</strong></td>
<td>S = Submission; R = Re-Submission; P = Provisional Authorisation; A = Authorisation</td>
</tr>
<tr>
<td><strong>Approval date:</strong></td>
<td>2015-10-30</td>
</tr>
<tr>
<td><strong>Expiry date:</strong></td>
<td>2018-10-30</td>
</tr>
</tbody>
</table>

**Special conditions of the approval (if any):** None

**General conditions:**

While this ethics approval is subject to all declarations, undertakings and agreements incorporated and signed in the application form, please note the following:

- The project leader (principle investigator) must report in the prescribed format to the NWU-IRERC:
  - annually (or as otherwise requested) on the progress of the project,
  - without any delay in case of any adverse event (or any matter that interrupts sound ethical principles) during the course of the project.

- The approval applies strictly to the protocol as stipulated in the application form. Any changes to the protocol be deemed necessary during the course of the project, the project leader must apply for approval of these changes at the NWU-IRERC. If there be deviated from the project protocol without the necessary approval of such changes, the ethics approval is immediately and automatically forfeited.

- The date of approval indicates the first date that the project may be started. If the project have to continue after the expiry date, a new application must be made to the NWU-IRERC and new approval received before or on the expiry date.

- In the interest of ethical responsibility the NWU-IRERC retains the right to:
  - request access to any information or data at any time during the course or after completion of the project;
  - withdraw or postpone approval if:
    - any unethical principles or practices of the project are revealed or suspected,
    - it becomes apparent that any relevant information was withheld from the NWU-IRERC or that information has been false or misrepresented,
    - the required annual report and reporting of adverse events was not done timely and accurately,
new institutional rules, national legislation or international conventions deem it necessary.

The IRERC would like to remain at your service as scientist and researcher, and wishes you well with your project. Please do not hesitate to contact the IRERC for any further enquiries or requests for assistance.

Yours sincerely

Linda du Plessis

Digitally signed by Linda du Plessis
DN: cn=Linda du Plessis, o=NWU, ou=Vaal Triangle Campus, email:linda.duplessis@nwu.ac.za, c=ZA
Date: 2015.11.09 09:09:10 +02'00'