CHAPTER – 1

INTRODUCTION
# CHAPTER – 1 INTRODUCTION

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(CHAPTERLIZATION)
CHAPTER - 1
INTRODUCTION

1.1 INTRODUCTION

The researcher has seen many obese students in the society. She is serving as a teacher in higher secondary school. She has decided to study of the students in the psychology. In her U.G and P.G study of psychology subject. She has discussed with some Ph.D. Guide of psychology about this problem. After deep thinking she has decided to select obesity in Ph.D. subject and has made the Title as a Ph.D. Research work

Psychology being a science of human behavior is ultimately Concerned with any problem that touches human behavior. So, psychology cannot ignore this vast field of inquiry. It can remain silent only at the cost of its own progress. So a special branch of psychology has emerged as a discipline to study obese students’ problems and their behavior.

This problem is related to the education psychology, Abnormal psychology, Clinical psychology and social psychology. So, it struck to the present investigator that why not study the these students who are suffering from obesity problems.

Adolescence (Latin adolescere means ‘to grow’) is a transitional stage of physical and mental human development that occurs between childhood and adulthood. This is a phase of life when human is leaving Childhood but has not yet acquired adulthood. This transition involves biological, social and psychological changes.

Adolescent period also known as the teenage are generally, from ages 13 to 21 years. However, there are three stages of adolescent as under.

(A) Early adolescence ( 11 years upto 14 years )

(B) Middle adolescence ( Above 14 years upto 17 years )

(C) Later adolescence ( Above 17 years upto 21 years )
The end of adolescence and the beginning of adulthood vanes by country and by function and furthermore even within a single nation state or culture there can be different ages at which an individual is considered to be (chronologically and legally) mature enough to be entrusted by society with certain tasks.

The adolescent is a transitory period between childhood and adulthood. Three sets of definitions together are needed to give a comprehensive view of adolescence.

1. A biological definition emphasizes the events of puberty that transform the bodies of children into those of sexually and physically mature adults.

2. A psychological definition distinguishes adolescence in terms of the developmental tasks to be accomplished. Each of the tasks adolescents face relate to the central task of achieving a stable personal identity.

3. A sociological definition defines adolescents in terms of their status within society.

Generally the adolescent period has definite age range. Early adolescents (approximately 11 to 15 years) must contend with puberty, changing gender roles and developing move autonomous relationships with parents and more mature relationships with peers. Later adolescents (approximately 16 to 21 years) face the need to integrate their sexuality into their relationships, prepare for adult work roles arrive at a set of values to guide their behavior and through each of these achieve a sense of their own identity.

The adolescents of today are suffering from many psychological problems. These problems are due to various reasons. One of them is Obesity. Some Adolescents’ bodies are not found in figure and well shaped. However their bodies are to increased fat wise. They become fat day by day. This condition is harmful not only to their organic system, but to their mental condition also. Their mind are not in the position as we find in the Non – obese adolescents. Especially they suffer from the psychological problems like Obesity level (Condition) Academic stress and Self analysis. As per the recent report the obese adolescents are increasing every year. According to a rough estimate about 6% adolescents become victim of the obesity. In turn, they suffer from the above mentioned psychological problems like stress and self
analysis. These problems require through inquire – From this need the present Research Problem was formulated.

Obesity is a medical condition in which excess body fat has accumulated to the extent that it may have an adverse effect on health, leading to reduced life expectancy and increased health problems. (Haslam DW, James WP (2005) Body mass index (BMI), a measurement which compares weight and height, defines people as overweight (per-obese) if their BMI is between 25–30 kg/m², and obese when it is greater than 30kg/m².

Obesity increases the likelihood of various diseases, particularly heart disease, type 2 diabetes, obstructive sleep apnea, certain types of cancer, and osteoarthritis. Obesity is most commonly caused by a combination of excessive food energy intake, lack of physical activity, and genetic susceptibility, although a few cases are caused primarily by genes, endocrine disorders, medications or psychiatric illness. Evidence to support the view that some obese people eat little yet gain weight due to a slow metabolism is limited; on average obese people have a greater energy expenditure than their thin counterparts due to the energy required to maintain an increased body mass. (Kushner, Robert (2007) (Adams JP, Murphy PG July 2000)

Dieting and physical exercise are the mainstays of treatment to reduce obesity. Moreover, it is important to improve diet quality by reducing the consumption of energy-dense foods such as those high in fat and sugars, and by increasing the intake of dietary fiber. To supplement this, or in case of failure, anti-obesity drugs may be taken to reduce appetite or inhibit fat absorption. In severe cases, surgery is performed or an intragastric balloon is placed to reduce stomach volume and bowel length, leading to earlier satiation and reduced ability to absorb nutrients from food. (Imaz I, Martinez – Cervell C)

Obesity is a leading preventable cause of death worldwide, with increasing prevalence in adults and children, and authorities view it as one of the most serious public health problems of the 21st century. (Barness E (December 2007) Obesity is stigmatized in much of the modern world (particularly in the Western world), though it was widely perceived as a symbol of wealth and fertility at other times in history, and still is in some parts of the world. (Wooghouse R (2008))
The healthy BMI range varies with the age and sex of the child. Obesity in children and adolescents is defined as a BMI greater than the 95th percentile. The reference data that these percentiles are based on is from 1963 to 1994 and thus has not been affected by the recent increases in rates of obesity. Gray D. S. Fujioka k (1991) Childhood obesity has reached epidemic proportions in 21st century, with rising rates in both the developed and developing world. Rates of obesity in Canadian boys have increased from 11% in 1980s to over 3% in 1990s, while during this same time period rates increased from 4 to 14% in Brazilian children. Johansson E. Bockerman p, Riskinen U, Heliovaara M (2009).

As with obesity in adults, many different factors contribute to the rising rates of childhood obesity. Changing diet and decreasing physical activity are believed to be the two most important in causing the recent increase in the rates. Cawley j. Meyer hoefer c (January 2012) Because childhood obesity often persists into adulthood and is associated with numerous chronic illnesses, children who are obese are often tested for hypertension, diabetes, hyperlipidemia, and fatty liver. Treatments used in children are primarily lifestyle interventions and behavioral techniques. In the United States, medications are not FDA approved for use in this age group.

1.2 MEANING OF RESEARCH

Research is consisted of two words i.e. “Re” and “search”. Re means again & again and search means to find out some thing new. Hence Research means a process, in which an individual observes the phenomena again and again, gathers data and draws conclusions on the basis of data. Considering the dictionary meaning of research, it means inquiry about facts to discover new knowledge, careful search through scientific study. Research is a careful and scientific quest for knowledge of truth. It is an attempt to get valuable information. This valuable information can be applied in real situation for further development. Hence research is a process of systematic study in order to get responses of meaningful questions about phenomena or events by the application of scientific procedures. Research leads to the formulation of new principals or theories, improvement of generalization, finding new concepts, and method. It enables one in formulating and testing the hypotheses.
Research always provides a new direction and dimension for applying its findings in real situation and for further development that becomes an endless inquiry.

1.3 DEFINITION OF RESEARCH

Clifford Woodey:

Research is a careful inquiry in seeking facts or principles a diligent investigation to ascertain something.

1.4 TYPES OF RESEARCH:

There are two types of research are as under.

(a) Applied research

Travers – Applied research is undertaken to solve an immediate practical problem and the goal of adding to scientific knowledge is secondary.

(b) Action research

Lehman and Mehrens define Action Research as Action Research is a type of applied or decision oriented research, but with the stipulation that the research is the same person as the practitioner who will make and live with the decision.

The applied research utilizes the scientific method of inquiry. The findings are evaluated in terms of universal validity. It is also known as field research. Applied research is meant mainly for improving school practices and suggests teacher for improvement. Applied research solves most of the problems faced by teachers, administrators and policy makers and society.
1.5 THE PROBLEM OF THE STUDY:

“A PSYCHOLOGICAL STUDY OF OBESITY LEVEL (CONDITION), ACADEMIC STRESS AND SELF ANALYSIS OF OBESE ADOLESCENTS STUDENTS”

1.6 WHAT IS A HYPOTHESIS?

Ordinarily, when one talks about hypothesis, one simply means a mere assumption or some supposition to be proved or disproved. But for a researcher hypothesis is a formal question that he intends to resolve. Thus a hypothesis may be defined as a proposition or a set of proposition set forth as an explanation for the occurrence of some specified group of phenomena either asserted merely as a provisional conjecture to guide some investigation or accepted as highly probable in the light of established facts. Quite often a research hypothesis is a predictive statement, capable of being tested by scientific methods, that relates an independent variable to some dependent variable. For example, consider statements like the following ones.

These are hypotheses capable of being objectively verified and tested. Thus, we may conclude that a hypothesis states what we are looking for and it is a proposition which can be put to a test to determine its validity.

Characteristics of hypothesis:

Hypothesis must possess the following characteristics.

(1) Hypothesis should be clear and precise. If the hypothesis is not clear and precise, the inferences drawn on its basis cannot be taken as reliable.

(2) Hypothesis should be capable of being tested. In a swamp of untestable hypotheses, many a time the research programs have bogged down. Some prior study may be done by researcher in order to make hypothesis a testable one. A hypothesis “is testable if other deductions can be made from it which, in turn, can be confirmed or disproved by observation.”
(3) Hypothesis should state relationship between variables, if it happens to be a relational hypothesis.

(4) Hypothesis should be limited in scope and must be specific. A researcher must remember that narrower hypotheses are generally more testable and he should develop such hypotheses.

(5) Hypothesis should be stated as far as possible in most simple terms so that the same is easily understandable by all concerned. But one must remember that simplicity of hypothesis has nothing to do with its significance.

(6) Hypothesis should be consistent with most known facts i.e., it must be consistent with a substantial body of established facts. In other words, it should be one which judges accept as being the most likely.

(7) Hypothesis should be amenable to testing within a reasonable time. One should not use even an excellent hypothesis, if the same cannot be tested in reasonable time for one cannot spend a life – time collecting data to test it.

(8) Hypothesis must explain the facts that gave rise to the need for explanation. This means that by using the hypothesis plus other known and accepted generalizations, one should be able to deduce the original problem condition. Thus hypothesis must actually explain what it claims to explain; it should have empirical reference.

Concept of hypothesis:

A hypothesis is a proposition - a tentative assumption which a researcher wants to test for its logical or empirical consequences. Hypotheses are more useful when stated in precise and clearly defined terms. It may be mentioned that though a hypothesis is useful it is not always necessary, especially in case of exploratory researches. However in a problem oriented research, it is necessary to formulate a hypothesis or hypothesis. In such researches, hypotheses are generally concerned with the cause of a certain phenomenon or a relationship between two or more variables under investigation.
Hypothesis Testing:

A number of steps are involved in testing a hypothesis.

1. Formulate a hypothesis.
2. Set up a suitable significance level.
3. Choose a test criterion.
4. Compute the statistic.
5. Make decision.

1.7 WHAT IS OBESITY LEVEL (CONDITION):

Obesity is the state of being well above one’s normal weight.

A person has traditionally been considered to be obese if they are more than 20 percent over their ideal weight. That ideal weight must take into account the person’s height, age, sex and build.

Obesity has been more precisely defined by the National Institutes of Health (the NIH) as a BMI of 30 and above. (a BMI of 30 is about 30 pounds overweight) \( m^2 \) (squared). Since the BMI describes the body weight relative to height, it correlates strongly (in adults) with the total body fat content. Some very muscular people may have a high BMI without undue health risks. The BMI (body mass index), a key index for relating body weight to height, is person’s weight in kilograms (kg) divided by their height in meters.

OBESITY MEANS:

Obesity is a disease characterized by excessive body fat. People who are usually affected by behavior, genetic and environmental factors to control with dieting obesity increases the likelihood of certain diseases health problems.
With this meanings of research and definition researcher wants to study in the following objectives for the obese respective adolescents.

**CAUSES FOR OBESITY**

* Obesity and over-weight are caused by a chronic imbalance between energy in take and energy expenditure.

* High intake of dietary fat also causes Obesity.

* Poor exercise and sedentary lifestyle are the main causes for Obesity.

* Complex behavior and psychological factors also cause over-eating and thus lead to Obesity.

* Metabolic errors in energy utilization may favour fat accumulation.

* Obesity in childhood and adolescence can lead to adult Obesity.

**OBESITY LEVEL (CONDITION)**

**Ideal Body Weight.**

Desirable body weight is weight for height of young adults at their best physical performance. The most commonly used measure is Body Mass Index (BMI) and it is computed by dividing weight in kilogram by the square of the height in meter (Weight (kg) / Height (meter)²)

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<td>&lt;18.5</td>
<td>Undernourished</td>
</tr>
<tr>
<td>&gt;25</td>
<td>Over weight</td>
</tr>
<tr>
<td>&gt; 30</td>
<td>Obese</td>
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1.8 DEFINITION AND MEASUREMENT OF OBESITY:

Obesity can easily be defined as a state of excess body fat to the extent of causing health hazards. But there is a need of clear cut objective criteria to define the problem status. The terms ‘obese’ and ‘overweight’ bar separate meaning in this context and should not be used interchangeably. Based on the different aspects or characteristics of obesity, various measurement tools can be used. For this purpose there are various measurement tools available for community and clinic use.

1.9 BODY MASS INDEX (BMI)

The body weight is reasonably correlated with the body fat but is also closely related with the height squared (BMI – kg/m$^2$) is fairly reliable surrogate for adiposity.

Pietrobelli et al (1998) has shown that the BMI has become the acceptable format for children and adolescents to measure obesity. It is both gender and age specific.

In 1997 both the consensus panel led by Barlow and Dietz as well as an international conference convened by the International obesity Task Force (IOTF) concluded BMI to be the most reliable measure for assessing overweight in children and adolescents worldwide.

A recent Indian study by Aggarwal et al (2001) has described indices for growth monitoring including centiles for BMI for Indian children based on the data received from affluent children of North India.

1.10 TYPES OF OBESITY

The fat distribution in the body is identified among the two types of obesity android & gynoid. Android in the male type of obesity where excess fat is marked in the upper half of the body. There two types are explains here.
ANDROID:

Android type of obesity is likened to the shape of an apple. The shoulders, face, arms, neck, chest & upper portion of the abdomen are bloated. The stomach gives a stiff appearance. So also the arms, shoulders & breast. The back seems to be erect but the neck is compressed and there will be protruding chest because of the bulk in the stomach. The lower portion of the body the hips, thighs & legs are thinner beyond proportion in comparison with the upper part. In these persons the vital organs affected will be mostly the heart, liver, kidneys & lungs. Though this typed of obesity is found more in males it is common in females too. Those females, who are under hormone treatment for their menstrual abnormalities or after childbirth, are more prone to this type of obesity. It occurs in females around menopause too due to thyroid gland’s functional disturbance. In this type, the excess flesh is less likely to reduce especially in female than males. Android type of obesity is a major risk for heart damage & heart disease due to high cholesterol.

GYNOID:

In this type the lower part of the body has the extra flesh. This type of obesity is also common to both sexes though females are more affected. Gynoid type of obesity is similar to pears. The flesh is somewhat flabby in the abdomen, thighs, buttocks & legs. The face & neck mostly give a normal appearance. In some persons the cheeks may be drawn too. As these persons grow old the whole figure assumes a stopping posture and the spine is never erect due to the heavy hips & thighs. This vital organs affected mostly are the kidneys, uterus, intestines, bladder & bowls. But the functions of these organs some times have a direct effect on the heart. In this type of obesity, exercises or dieting will not help appreciably in reducing weight.
1.11 THE PICTURE OF THE OBESITY DURING GROWTH:

Most people turn obese due to the circumstances and environment they grow in. Lack of exercise and over eating are the reasons for such type of obesity. This can be controlled through proper diet habits and regular exercise.

1.12 PSYCHOLOGICAL EFFECTS OF OBESITY TO A PERSON:

Being severely obese has serious psychological and social repercussions. Many people who are overweight are subject to disapproval, even lectures, from family and friends and to sneers and remarks from strangers. Such behavior is propagated by general societal belief that obesity is caused by a lack of self-discipline or moral weakness. These attitudes carry over into the work world, where a job or a promotion is often denied simply because of how much one weighs.

Not surprising, many obese people prefer not to go out in public because they feel self-conscious or they simply cannot enjoy activities that most people take for granted, like going to the movies, taking the subway, or going on vacation – because the seats are too small, the turnstiles are too narrow, or the accommodations are too uncomfortable.
All these experiences, repeated day after day for years, can lead to depression, anxiety, or low self-esteem. In one study, severely obese persons were asked to choose between being obese or having some other infirmity. The results were astounding. By and large, the respondents said that they would rather be blind or have one leg amputated than be at their present weight. Most interestingly, everyone said they would rather be poor and thin than rich and overweight.

A 1991 study showed that 80 percent of severely obese people:

- Perceive themselves as physically unattractive
- Believe that others make disparaging comments about their weight
- Dislike being seen in public
- Feel discrimination when applying for jobs
- Feel that they are treated disrespectfully by their physician

Indeed, several studies suggest that many physicians do treat obese patients disrespectfully. In a 1969 survey of physicians, obese patients were described as “weak-willed”, “ugly”, “awkward” and “self-indulgent”. In a more recent physician survey, one of three doctors said they respond negatively to obesity, behind three other diagnostic/social categories: drug addiction, alcoholism, and mental illness. A comparable study found that two-thirds of doctors believe obese patients lack self-control, and 39 percent feel they are lazy. Two studies of nurses showed similar results.

The truth of the matter is that morbid obesity is a chronic medical illness, although a good portion of society and the health-care establishment does not seem to agree. At NYU, we strive to educate the professionals and laypeople alike of the seriousness of this disease and the need to change the way it is viewed and treated.

The rise in childhood obesity in America carries a number of potentially serious ramifications. By increasing awareness of these risk factors, experts hope that the epidemic of obesity and the repercussions can be reduced. If your child is obese or
at risk for obesity and demonstrates psychological symptoms, seek guidance from a qualified professional who can guide you toward proper treatment.

**LOW SELF – ESTEEM**

Since children are just beginning to nurture and develop self – concept, childhood is a critical time in which self – esteem should be nurtured. According to research conducted at Missouri Western state University, a strong correlation exists between children’s weight and their self – esteem, and obese children carry the highest risk for developing low or severely low self – esteem. Their poor feelings of self – worth often carry on into adulthood. The study also found that obese children with reduced self – esteem are apt to seek ways of hiding their bodies by wearing baggy clothes or slouching.

**DEPRESSION**

Depression is an emotional condition characterized by elongated periods of negative moods, such as sadness, loneliness or lack of purpose. According to TDH, obese children are at heightened are often insecure about their body size and often experience ridicule from their peers, depressive thoughts and behavior can worsen if they are not addressed. Though obesity presents itself physically through excess body weight, the underlying issues, such as depression and personal insecurities, must be addressed in order for the best chances of improved weight management and emotional health.

**ANXIETY**

Anxiety is a common emotion amongst children at various ages. When it becomes severe, however, it may be indicative of more serious, psychological problems. According to TDH, obese children are at greater risk for developing severe anxiety than children of healthy weight. The American Academy of child and adolescent psychiatry explains that in cases of severe anxiety, symptoms such as obsessive fearful thoughts, fear of embarrassment and constant worrying detract from a child’s usual life and activities, whereas mild or normal levels of anxiety do not.
1.13 WHAT ARE THE CAUSES OF OBESITY?

Obesity is due to an individual taking in more calories than they burn over an extended period of time. These “extra” calories are stored as fat. Although there are several factors that can lead to this energy imbalance in obese individuals, the main contributors are behavior, environment and genetics.

BEHAVIOR

In today’s fast-paced environment, it is easy to adopt unhealthy behaviors. Behavior, in the case of obesity, relates to food choices, amount of physical activity you get and the effort to maintain your health. Based on food choices, many people now select diets that are calorie-rich, but nutrient-poor. This behavioral problem also relates to the increase in portion sizes at home and when dining out.

ENVIRONMENT

Environment plays a key role in shaping an individual’s habits and lifestyle. There are many environmental influences that can impact your health decisions. Today’s society has developed a more sedentary lifestyle. Walking has been replaced by driving cars, basic physical activity has been replaced by technology and nutrition has been overcome by convenience foods.

GENETICS

Science shows that genetics play a role in obesity. Genes can cause certain disorders which result in obesity. However, not all individuals who are predisposed to obesity become obese. Research is currently underway to determine which genes contribute most to obesity.

1.14 WHAT ARE THE SOCIAL EFFECTS OF OBESITY?

Individuals affected by obesity often face obstacles far beyond health risks. Emotional suffering may be one of the most painful parts of obesity. Society often emphasizes the importance of physical appearance. As a result, people who are obese
often face prejudice or discrimination in the job market, at school and in social situations.

EFFECTS AT WORK

Due to the negative stigma associated with obesity, obese employees are often viewed as less competent, lazy and lacking in self-discipline by their co-workers and employers. Often times, discriminatory attitudes can negatively impact wages, promotions and employment status for obese employees.

Finding a job can also be a difficult task for an obese individual. Studies show that obese applicants are less likely to be hired than thinner applicants, despite having identical job qualifications.

EFFECTS AT SCHOOL

Educational settings also provide the possibility for discriminatory situations. Obese children face numerous obstacles, ranging from harassment, teasing and rejection from peers, to biased attitudes from teachers.

At a young age, children are exposed to obesity’s negative stigma. Obese children are sometimes characterized as being unhappy, lazy, mean and not having many friends.

IN HEALTHCARE SETTINGS

Negative attitudes about obese patients also exist in the healthcare setting. Obese patients are often reluctant to seek medical care, may be more likely to delay important preventative healthcare services and more frequently cancel medical appointments. Delaying medical attention can lead to delayed discovery or treatment of co-morbid conditions, such as diabetes and cardiovascular disease, while becoming more physically damaging.

The consequences of this discrimination can seriously impact an individual’s quality of life and only further intensify the negative stigma associated with obesity.
Academic stress among college students has been a topic of interest for many years. College students experience high stress at predictable times each semester due to academic commitments, financial pressures, and lack of time management skills. When stress is perceived negatively or becomes excessive, it can affect both health and academic performance (Campbell & Svenson, 1992). University students often attempt to control and reduce their stress through avoidance, religious and social support, or positive reappraisal (Mattlin, Wethington, & Kessler, 1990; Blake & Vandiver, 1988). Leisure satisfaction and fitness activities act as stress buffers, providing a sense of purpose and competence for college students (Ragheb & McKinney, 1993). Student academic stress is also reduced and controlled through effective time management and study techniques (Brown, 1991). Macan (1990) found that students who perceived themselves in control of their time reported greater work and life satisfactions and fewer job – induced and somatic tensions. Research examining gender differences and comparison of student and faculty perceptions of students’ academic stress, however, is limited.
Stress and anxiety in children and teenagers are just as prevalent as in adults. Negligence of parents, high expectations in academic or other performances, abused childhood, growing up tensions and demand for familial responsibility etc. The main causes of childhood and teen stress. Parents who are not emotionally available for their children or lack positive coping mechanisms themselves, often spur stress in their offspring.

Stressed children show signs of emotional disabilities, aggressive behavior, shyness, social phobia and often lack interest in otherwise enjoyable activities. In a study Dawood (1995) found that students stress affects their academic performance. He further showed that the most frequently mentioned stressor by students was school and fear related stressors. Many teenagers tend to become non–conformist and fall prey to teenage depression in response to a variety of growing up anxieties. However, stress induced fears and anxiety in children adversely affects children's performances at various levels. Hodge (1996) investigated that prevalence of stress were found particularly among those students who were by their nature prone to anxiety.

Tung and Chahal (2005) examined relationship between stress and adjustment and found no significical causal relationship between stress and the adjustment. However direction of the results implied that level of adjustment influences the number of stress full events and amount of stress experienced by them

1.16 WHAT IS MEANT BY SELF ANALYSIS?
Self analysis is a special case of social cognition in which we, rather than others, are the objects of perception. As a result of social interaction we learn a great deal about ourselves. Our self-concept that is the content of our knowledge and beliefs about our personal attributes and our self esteem. That is how we evaluate ourselves are influenced by the processes like self appraisal, social comparison and self – attribution of control, there are several aspects of self - analysis such as self complexity, self – discrepancies etc., people make many self esteem, self efficacy, perception, self attributions, including those explaining why they seceded or failed. People’s experiences regarding their action or the outcomes of these actions lead them to develop generalized expectancies that out come are internally or externally controlled and accordingly they are called internals or externals. People with an external locus of control (ELC) perceive their fate as controlled by factors outside themselves and that they have no control over what happens to them, they don’t put much effort in to their lives and become passive and feel helplessness. Seligman and his colleagues coined this phenomenon as “learned helplessness”. Revised learned helplessness model suggests that people who make internal, stable and global attribution for failures and other negative outcomes become depressed.

1.17 THE IMPORTANCE OF THE PRESENT STUDY:

There are various psychological studies regarding obesity level (condition), academic stress and self analysis of students in the various faculties. But most of them are separately carried out. There are hardly few studies that examine all this aspect jointly in a single research venture. But the researcher wants to know to need to be studied jointly for each of them affects the other directly or indirectly. So, the present investigator thought of planning such a venture in a clinical psychological field. As the investigator residing In Rajkot city she thought it was proper to study all these aspects simultaneously with regard to the students of obese adolescent students.

The investigator desires that this study would provide some important factual information about the students. Researcher believes that the effect of various independent variables of the obesity level (condition), academic stress and self
analysis can be seen in students. Thus, this study will be very useful to the students, teachers, family members of the students, university etc.

1.18 DELIMITATIONS OF THE STUDY:

The present study is quite limited in its overall scope. This study includes only students of the Rajkot city. The limitations are as under:

1. In the present study only 720 students will be contacted. But more such data could be taken.
2. Other independent variables in the addition to mention here could be included.
3. Instead of only Rajkot city other districts could be covered.
4. Other tools also can be applied such as self analysis, Personality etc.
5. Other methods of the data collections can be used i.e. Observation, projective method etc.
6. Other statistical methods can be used i.e. Chi-square, 2×2×2 etc.

This is how the scope of the present study is limited in various way even then the researcher hopes to provide valuable information and insights with regards to facts of the obese adolescents students.

1.19 ORGANIZATION OF THE STUDY MATERIAL:

(CHAPERTIZARION)

The contents of the thesis are organized in the five chapters as follows.

Chapter 1: Introduction

First chapter under the title “INTRODUCTION” In this chapter the investigator has shown how he selected the topic for research. She has discussed the
historical background and specified the topic of her research and has clarified the objectives of her studies. Than she has presented the basic null hypotheses in detail. The three main concept of Obesity level (condition) Academic stress and Self Analysis are explained appropriately. Operational definitions of important terms are provided along with the specifications of various variables of the study and at last the importance and the scope of the present study are properly brought in to light.

Chapter – 2 : Review of Relevant Literature:

The second chapter under the title “REVIEW OF LITERATURE” In this chapter the researcher has taken a plunge in to the vast ocean of the scientific endeavor that has already been put forth in the past. Various studies that have been undertaken with regard to Obesity level (condition), Academic Stress and Self Analysis are reviewed in detail studies carried out with regard to certain personal and social factors that contribute or contaminate Obesity level (condition), Academic Stress and Self Analysis also are being reviewed. The review points out the gaps in the previous research. There is no doctoral investigation carried out with respect to Obesity level (condition) Academic Stress and Self Analysis of the adolescent students. Hardly any such study is, so far under taken especially no psychologist has taken the trouble of finding out the adolescents students.

Thus, this is one of the pioneer researches in this field.

Chapter – 3 : Research Design procedure and analysis method:

The third chapter titled as “RESEARCH DESIGN, PROCEDURE AND ANALYSIS METHOD” discusses the research design of the present study. It includes aims and objectives, hypotheses, variables, selection of sample, the research tools used and the statistical techniques used to analyze the data.

Chapter – 4 : Analysis and Interpretations of the Result:

The fourth chapter under the title “ANALYSIS AND INTERPRETATIONS OF THE RESULT” In this chapter, the row scores on dependent variables are analyzed according to independent variables in to various table as well as according to different groupings of the sample. Than the various null hypotheses are tested and verified by the help partial correlation and with the help of ANOVAs techniques. The results are
discussed in light of these verifications and the information is interpreted in view of the various objectives of the study and ultimately the conclusions various suggestions to improve the level of Obesity level (condition), Academic stress and Self analysis of the adolescent students are made.

**Chapter – 5 : Summary and Conclusions:**

The chapter deals with “SUMMARY AND CONCLUSIONS” Overall summary of the research and the essence of conclusion are presented in nut shell in this chapter. Here the limitations of the present study are shown and suggestions for future research are presented properly.

A detailed bibliography is given at the end of the all chapters. Gujarati versions of Obesity level (condition), Academic stress and self analysis questionnaires are attached as appendix.

Now in the second chapter the review of previous literature of the present study will be discussed.

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