Associations of Clustering of Lifestyle Risk Factors and Mental Health Conditions with Overweight and Obesity Incidence among Female Teachers

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Introduction

• Malaysia is a upper middle income country in South East Asia

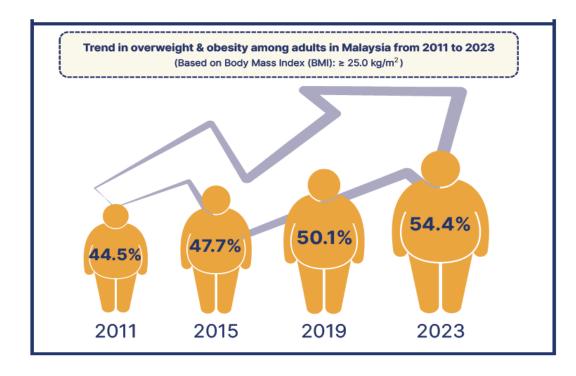
 With rapid development and globalization, there is a shift away from traditional diet towards more globalized dietary patterns (Shyam et al 2019)

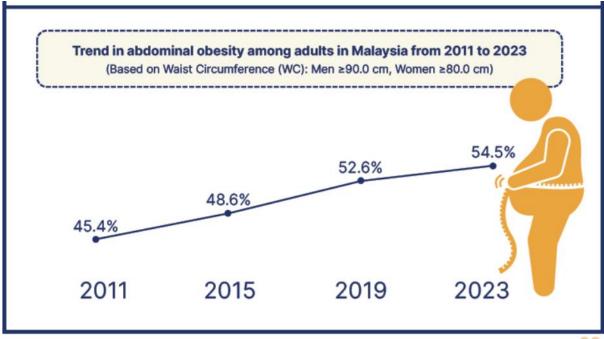
• In 2023, one in three of the adult population was physically inactive, higher than reported in 2019 (24.6%)

- Shyam, et al. Association between dietary patterns and overweight risk among Malaysian adults: Evidence from nationally representative surveys. Public Health Nutr. **2019**, 23, 319–328.
- Institute for Public Health 2024. National Health & Morbidity Survey (NHMS) 2023: Non-communicable Diseases and Healthcare Demand Key Findings

Introduction

- According to the National Health & Morbidity Survey (NHMS) 2023:
 - Prevalence of overweight / obesity (BMI) 54.4%
 - Prevalence of abdominal obesity 54.5%





Introduction

 Lifestyle behaviours and mental health conditions are independently associated with overweight and obesity among adults.

 However, there is a scarcity of studies focusing on the clustering of lifestyle factors with mental health conditions.

- Aim of study:
 - to investigate the clustering of lifestyle factors and mental health conditions and its associations with overweight/obesity among female teachers.

Methodology

- Study design: prospective cohort study
- Participants: 4664 female teachers from the state of Selangor, Malaysia.
- Baseline data was collected in 2013/2014:
 - Weight and height were measured
 - Self-administered questionnaire on:
 - lifestyle behaviours (physical activity, alcohol consumption, smoking, fruits and vegetables consumption)
 - mental health conditions (depression, anxiety, stress)
- Follow up was conducted in 2020/2021:
 - online questionnaire using REDCap on
 - Self-reported weight to generate overweight/obesity (BMI ≥25 kg/m²)
- Cluster analysis was performed to determine the cluster groups of lifestyle and mental health conditions
- Complex sample analysis with multiple logistic regression was conducted
- All statistical analyses were conducted using SPSS

- A total of 3221 (69%) participants were followed up
- Mean age of the participants was 40.82 (95% CI: 40.41, 41.23) years at baseline
- Prevalence of overweight/obesity at
 - baseline 51.2 (95% CI: 48.8, 53.5) % (n=1616)
 - follow up 61.7 (95% CI: 59.3, 63.9)% (n=1889)
- From the participants who were normal & underweight (n=1605) at baseline
 - Incidence of overweight/obesity at follow up: 34.4 (95% CI: 31.2, 37.7)% (n=525)

Baseline characteristics

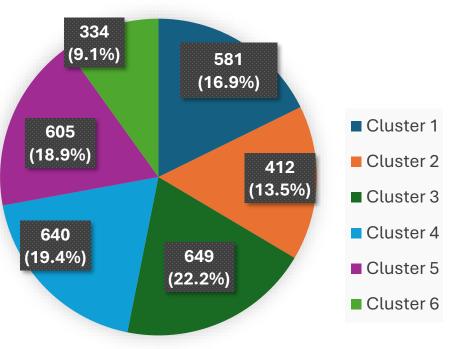
Participants were:

- Malays (73%)
- Married (89%)
- Degree holders (86%)
- Never smoke (99%)
- Non drinker (97%)
- Inadequate fruits & vegetables consumption (91%)
- Physically inactive (35%)

Mental health conditions:

- Abnormal depression score (>9): 26%
- Abnormal anxiety score (>7): 52%
- Abnormal stress score (>14):18%







Cluster groups

Cluster groups according to the most frequent category of lifestyle and mental health indicators

Variable	Fruit/vegetable consumption (F)		Depression (D)		Anxiety (A)		Stress (S)		Physical activity (P)		
	Adeq	Inadeq	N	Abn	N	Abn	N	Abn	НА	MA	IA
Cluster 1 (FDAS)		٧		٧		٧		٧		٧	
Cluster 2 (FDA)		٧		٧		٧	٧			٧	
Cluster 3 (FA)		٧	٧			٧	٧			٧	
Cluster 4 (FP)		٧	٧		٧		٧				٧
Cluster 5 (F)		V	٧		٧		٧			٧	
Cluster 6 (no risk)	٧		٧		٧		٧			٧	

N= normal, ABN= abnormal, Adeq= adequate, Inadeq= inadequate, HA= highly active, MA= minimally active, IA= inactive Chi square test showed that all five indicators were significantly different (*p*-value <0.05) between cluster groups.

Association of Cluster groups with incidence of overweight /obesity

Cluster groups	aOR*	95% CI			
Cluster 6 (None)	1				
Cluster 5 (F)	1.62	0.86, 3.03			
Cluster 4 (FP)	1.45	0.78, 2.67			
Cluster 3 (FA)	1.84	1.01, 3.34			
Cluster 2 (FDA)	1.93	1.02, 3.64			
Cluster 1 (FDAS)	2.33	1.23, 4.40			

^{*}adjusted for ethnicity, age, education levels, smoking status, medical history and alcohol consumption

Discussion

- Less than 10% of participants had no risk factor (Cluster 6)
- Clusters 4, 5 and 6 with normal mental health conditions were not associated with overweight/obesity incidence
- Cluster 1 (FDAS), Cluster 2 (FDA) and Cluster 3 (FA) had increased odds of overweight/obesity incidence
- Mental conditions such as depression, anxiety and stress may have influenced the diet to be unhealthily, hence contributing to weight gain

Conclusions

 Clustering of lifestyle risk factors and mental health conditions were associated with incidence of overweight/obesity among the female teachers

 There is an urgent need to integrate multicomponent interventions, with lifestyle modification and psychological approaches, to enhance the effectiveness of overweight/obesity prevention strategies and weight-loss programs among female teachers

Thank you



