# Prevalence of Health-fitness Care among Men and Women in Haryana: An Analysis 

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#### Abstract

Science and technology have revolutionized today's life style. Today, man has more comforts at his disposal. Most of the modern jobs and activities do not need much physical activities; those which used to demand physical labor have been replaced by machines. Household durable goods like washing machines, cooking gas and electric ovens etc. have contributed to reduced physical activity. Most of the leisure time is being spent in front of TVs. Application of transportation even for short distances are increasing. The absence of physical activity in today's lifestyle is main issue of worry. Because of urbanization and modernization, lives are becoming more sedentary and less physically active than ever before. Along with sedentary lifestyles, consumption of oily and junk food is increasing and contribution of homemade food to our diet is continuously decreasing. People are turning more and more towards ready to eat, less time consuming food without thinking about the nutritional aspects. One of the consequences of modern lifestyle, obesity is a leading public health concern today which is increasing at an alarming rate throughout the world. The rapidly increasing prevalence of obesity has led to obesity being characterized as an epidemic. Obesity and its complications are the leading health threat globally. According to WHO estimates, worldwide obesity has nearly doubled since 1980. In 2008, $35 \%$ of adults aged 20 and over were overweight and $11 \%$ were obese. Overall, more than $10 \%$ of the world's adult population was obese.


KEYWORDS: Nutritional aspects, Lifestyle, Urbanization, WHO, Obesity, Fitness Centers

## Introduction

Million children under the age of five years were overweight in 2011 according to WHO reports [WHO 2013]. WHO defines
"overweight" as an individual with a BMI of 25 or more and "obese" as someone with a BMI of 30 or higher [WHO 2000]. Obesity has reached epidemic proportions in India in
the 21 st century, with morbid obesity affecting a significant percentage of the country's population. National Family Health Survey [NFHS-2, 2000] shows 5.8 percent obese women with BMI 30or more and 17.7 percent overweight women with BMI 25-30 in urban India [NFHS 2000]. The data from NFHS-2 shows that three north Indian states of Delhi, Punjab and Haryana comprise 18.5 percent overweight and 7.2 percent obese women Punjab comes after Delhi with 21.1 percent overweight and 9.1 percent obese women. Also Haryana ranks third in north India. Based on data from the NFHS-3, 2007, Punjab ranks first on the list of the states of India ranked in order of percentage of people who are overweight or obese. According to this list, the percentage of women who are overweight or obese is highest in Punjab (30\%) followed by Kerala (28\%) and Delhi (26\%) [16]. Haryana is also not far behind. The Consultation on Obesity convened by

## Research methodology and data analysis

The data required for the study was collected with the help of survey Performa specially designed to collect the desired infrastructural and functional information from the members. The study covered four major districts of Haryana viz. Sonipat, Rohtak ,Jhajjar ,bhiwani, jind,and hissar.From each district, health clubs which were located in cities, towns and rural areas have been taken randomly and investigated. A total of 60 health fitness centers have been visited and 300 members have been enquired and interviewed for data collection. The total number of the members using the health fitness centers and facilities was very important factor to assess and determine the
growth of the health fitness industry. The data showed that in the 60 health fitness centers investigated, a total of 300 members were visiting health fitness centers, out of which 200 were male and 100 were female members [Table 1 Fig. 1

Table 1 Age wise distribution of members in health fitness centers

| Age in year | Male | Female |
| :--- | :--- | :--- |
| Below 18 | 17.92 | 16.68 |
| $18-25$ | 21.31 | 21.03 |
| $26-30$ | 37.47 | 33.97 |
| $31-40$ | 13.03 | 18.29 |
| $41-50$ | 10.15 | 8.97 |
| 51 and above | 0.75 | 1.06 |
| Total | 100.00 | 100.00 |

Age wise distribution of male and female members in health fitness centers


Table 1and fig. 1revals that average number of members visiting these health fitness centers was 97 per health fitness center, out of which are $71 \%$ were male and $26 \%$ were female members. The results showed that male members in the age group of 26-30 were using health fitness facilities more than other age groups. Similar to male members, female members in the age group of $26-30$ were visiting health fitness centers more than other age groups. Only $.75 \%$ male and $1.06 \%$ female members were found in above 51 age group category. The number of members was significantly lower than other age groups. In 160 health fitness centers which were surveyed during the data collection, a total membership of 300 was found which made only $0.2 \%$ of the population. This was a very tiny percentage which indicated that though fitness industry was expanding fast, still there was very less awareness about health and fitness in the people of Haryana which was evident from very small percentage of total population visiting these health fitness centers. It became clear after investigating the data that male and female members were more in the age groups of 'under 18' and '2630 years' as compared to other age groups. Out of a total of 300 members, about 215 members were found to be more in the
mentioned age groups which form $71.65 \%$ of the total members. This may be due to the fact that people in age group of 18-30 years were generally more active and energetic and more conscious of their appearance and body shape. In all, in 26-30 years age group there were found to be $37.47 \%$ male and $33.97 \%$ female members which were more than all other age groups. Another surprising fact came to light that in the age groups of 31-40, 41-50 and above 50 , only $28 \%$ members were found and more health related problems were found in these age groups. Regular exercise improves health and reduces the effect of age on body. But still with advancing age many kinds of changes start taking place in the body which affects the activity level of the individual. With increase in age, muscle mass begins to decrease which upsets the body's physical balance and also slows down the metabolism. Other than this, many kinds of effects such as increase in weight, decrease in energy level also start appearing. Especially in women, there are drastic changes in body between the ages 30 to 55 years like hormonal imbalances, increase in body weight, post pregnancy changes, menopause etc. To decrease these effects and reduce the effects of age on body, it is very important to exercise daily and lead an active life style. But the collected data
showed that female members in the age groups of $30-40$ years who were visiting health fitness centers were only 60 , which formed only $18 \%$ of the total number of female members. A very few facilities offered an active older adult program, but most of the health fitness centers did not put emphasis on the activities such as low-impact group exercise with social components. As the age limits in the groups increased, the percentages of the membership decreased and it was a matter of concern that very few women in the older age groups were visiting the health fitness centers. Exercise reduces the effect of age on body as well as improves the quality of life and life longevity. In health fitness centers, there were less services and training programs for older age members. Due to that the older population was less attracted towards health fitness. The average number of members visiting these health fitness centers was 97 per health fitness center, out of which $71 \%$ were male and $26 \%$ were female members. The results showed that male members in the age group of $25-30$ were using health fitness facilities more than other age groups. Similar to male members, female members in the age group of 25-30 were visiting health fitness centers more than other age groups. Only $0.75 \%$ male and $1.47 \%$
female members were found in above 50 age group category. The number of members was significantly lower than other age groups. In 60 health fitness centers which were surveyed during the data collection, a total membership of 756was found which made only $0.2 \%$ of the population. This was a very tiny percentage which indicated that though fitness industry was expanding fast, still there was very less awareness about health and fitness in the people of Punjab which was evident from very small percentage of total population visiting these health fitness centers. It became clear after investigating the data that male and female members were more in the age groups of 'under 18' and '2630 years' as compared to other age groups. Out of a total members, about members were found to be more in the mentioned age groups which form $71.65 \%$ of the total members. This may be due to the fact that people in age group of $18-30$ years were generally more active and energetic and more conscious of their appearance and body shape. In all, in 2630 years age group there were found to be $37.47 \%$ male and $33.97 \%$ female members which were more than all other age groups. Another surprising fact came to light that in the age groups of 31-40, 41-50 and above 50, only $28 \%$ members were found and more
health related problems were found in these age groups. Regular exercise improves health and reduces the effect of age on body. But still with advancing age many kinds of changes start taking place in the body which affects the activity level of the individual. With increase in age, muscle mass begins to decrease which upsets the body's physical balance and also slows down the metabolism. Other than this, many kinds of effects such as increase in weight, decrease in energy level also start appearing. Especially in women, there are drastic changes in body between the ages 30 to 55 years like hormonal imbalances, increase in body weight, post pregnancy changes, menopause etc. To decrease these effects and reduce the effects of age on body, it is very important to exercise daily and lead an active life style. But the collected data showed that female members in the age groups of 30-40 years who were visiting health fitness centers were only $10.15 \%$, which formed only $08.97 \%$ of the total number of female members. A very few facilities offered an active older adult
program, but most of the health fitness centers did not put emphasis on the activities such as low-impact group exercise with social components. As the age limits in the groups increased, the percentages of the membership decreased and it was a matter of concern that very few women in the older age groups were visiting the health fitness centers. Exercise reduces the effect of age on body as well as improves the quality of life and life longevity. In health fitness centers, there were less services and training programs for older age members. Due to that the older population was less attracted towards health fitness centers. If the health fitness centers want to survive longer, then they must realize that the primary market for the health fitness center industry of the future will be the active older adults. 61It was also very interesting to note that the number of male members or gym goers was much higher (about 56\%) than female members. Only 27\% female members were found visiting these health fitness centers during the survey

## Table 2 district Wise Level of Satisfaction of Respondents

| Sr. No. | district | Satisfied | Not Satisfied | No <br> Opinion | Total Respondents |
| :--- | :--- | :--- | :--- | :--- | :--- |
| 1. | hissar | $32(64)$ | $14(28)$ | $4(8)$ | $50(100)$ |

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| 2. | Bhiwani | $38(76)$ | $10(20)$ | $2(4)$ | $50(100)$ |
| :--- | :--- | :--- | :--- | :--- | :--- |
| 3. | Sonipat | $30(60)$ | $19(38)$ | $1(2)$ | $50(100)$ |
| 4. | Jajjhar | $34(68)$ | $13(46)$ | $3(6)$ | $50(100)$ |
| 5. | Jind | $33(66)$ | $10(20)$ | $7(14)$ | $50(100)$ |
| 6. | rohtak | $45(90)$ | $3(6)$ | $2(4)$ | $50(100)$ |
| Total Respondents | $212(70.66)$ | $69(23)$ | $19(6.33)$ | $300(100)$ |  |

Source: Primary Data (Percentages are given in brackets)

In the present problem, which is associated with role of health center play a very important role in development of health's satisfaction level which is hypothetically uniform throughout Haryana selected districts. This hypothesis has tested through t -test technique.

| Suppose Sample | Null Hypothe <br> Highly Developed | Ho $=\mu_{1}=\mu_{2}$ <br> Lesser Developed | Calculated Value | Tabulated Value |
| :--- | :--- | :--- | :--- | :--- |
| Mean | 71.75 | 63.75 | 3.64 | 2.28 |
| S.D | 4.97 | 2.90 |  |  |

$\mathrm{V}=4+8-2=10$

On the basis of observed and tabulated data, we found that the calculated value is more than the tabulated value. Hence, it is indicate that the level of satisfaction of the respondents, indicate a considerable variability of the personnel, belong to administrative machinery' engaged for accomplish this programme. On the basis of empirical study, based on six places, selected from different districts of Haryana, indicate a considerable variability in their implementation. However, variability has been tested by t-test. The hypothesis has developed on preliminary
investigation on the peoples, belonging in different areas of Haryana. District wise distribution of male female members showed that the number of male members was more in district Rohtak as compare to other five districts much more satisfied with health fitness .out of 300 respondent $70.66 \%$ repondent are satisfied with health fitness centers are very important but reaming says not only heath other factors are essential for health development. The difference does exist between the numbers of members in various districts but the difference was not
very significant. So we can say that the interests of the members among the health fitness centers are more or less similar in all six districts.

## Suggestions

There is a need to increase the benefits of welfare health fitness center can fulfill the prescribed target after analyzing study some important suggestions have given to improve the present health fitness
$>$ Formalities for the schemes should be minimized so that unaware persons can also avail these benefits easily.
$>$ A number of centers for women health fitness had been initiated during the last few years, but the implementation of facilities seems to be weak. The main attention is needed for the implementation overall the female population visiting health clubs was found to be very less as compared to male population. The situation was worse in rural areas where
$>$ almost no female client was found visiting these health centres and strengthening of centres at, various age group levels
> If the health fitness centres want to survive longer, then they must realize that the primary market for the health fitness centres industry of the future will be the active older adults.
$>$ Aware the peoples especially women of different age group for health fitness centres for batter health development.

## Conclusion

Though fitness industry is on the boom, which makes health clubs a profitable business but still the number of health clubs set up is quite less as is evident from the high ratio of individuals to health clubs. This indicates lack of awareness and interest among people about health and fitness in Punjab. Also, very small percentage of health clubs in rural areas as compared to urban areas indicates the lack of interest and awareness among rural population of Punjab as well as reluctance of investors to set up clubs in these areas though the percentage of rural population is larger than urban population. Also the standards of these health clubs were far below the desired standards. The reason behind less female population visiting health clubs may be either the lack of time or awareness among the women. Haryana has high rate of obesity and occurrence of lifestyle related diseases which makes the spreading of awareness about health and fitness extremely important.

## References

[1] Chiu, W., Lee, Y.,\& Lin, T. (2010). Per formance evaluation criteria for personal trainers: An analytical hierarchy process approach. Social Behavior and Personality: An International Journal, 38, 895-905
[2] De Lyon, A. T. C., \& Cushion, C. J. (2013). The acquisition and development of fitness trainers' professional knowledge. Journal of Strength \& Conditioning Research, 27, 1407-1422.
[3] Eickhoff-Shemek, J. M. (2010). An analysis of 8 negligence lawsuits against

International Journal of Research
Available at https://edupediapublications.org/journals
personal fitness trainers: 3 major liability exposures revealed. ACSM's Health \& Fitness Journal, 14(5), 34-37.
[4] Jeffery, R. W., Wing, R. R., Thorson, C., \& Burton, L. R. (1998). Use of personal trainers and financial incentives to increase exercise in a behavioral weight-loss program. Journal of Consulting \& Clinical Psychology, 66, 777-783
[5] Lubans, D. R., Plotnikoff, R. C., Jung, M., Eves, N., \& Sigal, R. (2012). Testing mediator variables in a resistance training intervention for obese adults with type 2 diabetes. Psychology \& Health, 27, 1388-1404.
[6] Macdonald, D. (2011). Like a fish in water: Physical education policy and practice in the era of neoliberal globalization. Quest, 63(1), 36-45
[7] Malek, M. H., Nalbone, D. P., Berger, D. E., \& Coburn, J. W. (2002). Importance of health science education for personal fitness trainers. Journal of Strength \& Conditioning Research, 16(1), 19-24.
[8] McKenzie, T. L., \& Lounsbery, M. A. F. (2009). School physical education: The pill not taken. American Journal of Lifestyle Medicine, 3, 219-225.
[9] World Health Organization, 2000: Obesity: preventing and managing the global epidemic, Report of a WHO Consultation
[10] WHO Technical Report Series 894. World Health Organization, 2011: Global recommendations on physical activity for health
[11] http://www.who.int/dietphysicalactivit y/pa/en/index.html

