Research Article

Barriers and Coping Strategies among Obese and Overweight Learners: Sequential Explanatory Study

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ABSTRACT

This study aims to assess the key barriers to physical activity among overweight and obese adolescents, discovering that the most significant obstacles are a lack of time, different priorities, and a poor perception of one's body. A mixed method sequential explanatory design was used in the study which involves 50 respondents and 8 outliers in one of the public senior high schools in Cluster 1, Division of Pampanga. These findings are consistent with broader research, which shows that time constraints, low motivation, and self-consciousness pose typical challenges for those dealing with weight concerns. Interestingly, the study finds that social support from friends is the preferred coping strategy, implying a preference for emotional comfort over creative solutions. Despite exhibiting good internal problem-solving skills in planning and goal setting, there is a lack of confidence in execution. Furthermore, preferred avoidance coping mechanisms, such as daydreaming and fantasizing, indicate a preference for emotional distance and self-soothing over direct confrontation. The study underlines the value of building self-acceptance and engaging in the present moment as potential alternatives to daydreaming. It also identifies possible issues such as low self-esteem and a desire to escape reality. Notably, overweight and obese learners face different physical and psychological difficulties. The study points out the importance of peer support in coping techniques, as students rely greatly on peers for emotional support, which inspires emotions such as belonging and appreciation. Lastly, learners indicate a stronger willingness to get involved with organized activities such as sports, recognizing the potential benefits of improving physical fitness. It is recommended to further investigate the roles of peer support and sport program and how they affect obese and overweight students. Additionally, it is also recommended to explore the metal health aspects.

Keywords: Barriers, Coping strategies, Obese and overweight learners, Physical fitness, Sequential explanatory

Introduction

Obesity raises the risk of illness due to the accumulation of extra fat and is defined as an excessive eating behaviour that interferes with an individual's healthy existence. It is a pretty common condition in the Philippines, where the majority of children suffer. However, there could be causes for this, such as the way they eat or environmental factors that influence their eating behaviours. Other factors that can influence a child's weight and contribute to obesity exist. A variety of factors contribute to childhood obesity in the Philippines, including cultural diversity and the prevalence of high-calorie, low-nutrient foods influencing dietary habits, environmental factors such as urbanization and easy access to unhealthy foods, genetic predispositions, and the serious health consequences of childhood obesity.

Sedentary lifestyles, in which obese and overweight learners prefer to rest rather than move and are not physically fit and active, frequently generate obstacles among them. The agony does not end with being obese and overweight since there are obstacles to overcome. This involves feeling tired after completing a basic job, having difficulty moving around, and having heavy breathing after doing anything fairly strenuous. There are numerous positive and negative coping mechanisms that these learners use to deal with the stress caused by their weight. Obese and overweight learners' good coping techniques include sketching, exercising, and writing, which can enhance their mental and physical health, but their bad coping strategies include stress eating, arguing, and inactivity.

Barriers

The primary reasons why learners have difficulty engaging in physical activity are their weight management, lack of excitement, and pain (Baillot, et al., 2021). Additionally, the most typical obstacles to physical activity are lack of time due to other commitments, personal/individual barriers, and environmental barriers are some of the reasons given by a cross-section of youngsters throughout the weight spectrum. Some obstacles to physical activity may be more harmful than others, and they may also be particularly specific to youth

with excess body mass. While weight loss programs often focus on dietary changes, increased physical activity, and modifying behaviors, maintaining weight loss in the long term proves difficult for many individuals (Othman, et al., 2022). In addition, women are more likely than men to be overweight or obese, which has far-reaching implications for their health, especially in the context of reproduction—obese women are more likely to develop gestational diabetes, pre-eclampsia, cesarean section, and newborn morbidity (Mazurkiewicz, et al., 2021).

Coping Strategies

Gill, et al., (2019), came to the conclusion that childhood obesity is linked to poor academic performance and coping mechanisms, which may have negative effects on both a person's personal and social well-being. Genetics aside, physiological and psychological factors strictly regulate each person's weight, which is the result of a balance between dietary intake and energy expenditure. For example, it is generally recognized that emotional distress is linked to problematic eating patterns such as binge eating and overeating (Aynehchi, et al., 2023). Christiansen, (2023), claimed that obese persons prefer to binge or overeat as a stress coping method, which leads to fat buildup and obesity.

The Obesity and Overweight

The World Health Organization (2023) defined obesity as abnormal or excessive fat accumulations that pose a health concern. In addition, a BMI of 25 or above is considered overweight, while a BMI of 30 or higher is considered obese. Obesity is a major health risk that is gaining traction across the world. Increased stress levels, skipping sleep, and not taking enough breaks all increase the risk of obesity in the general population. Stress causes irregular eating habits, a lack of exercise, and addiction, each of which is thought to be a separate contributor to the development of obesity (Bruna, 2020). In addition, according to UNICEF in 2022, obesity, formerly perceived to be an issue only in high-income and industrialized nations, is increasingly becoming a growing health concern in low- and middle-income

nations, including the Philippines. Furthermore, being overweight has been shown to have a detrimental influence on physical health, mental health, and quality of life (Lin, 2019). Environmental and societal development has led to changes in health, agriculture, food and nutrition, marketing, and education, which have resulted in these dietary and physical activity modifications (Gao, 2018). Moreover, the levels of individual characteristics, the intricate nature of childhood obesity, recognizing individual characteristics and the influence of both direct and indirect, and the complex ways in which these experiences interact with each other to influence the child's development, even if the child is not directly involved in them, as contributing factors all contribute to the development of childhood obesity according to Bronfenbrenner's ecological theory and Reifsnider's epidemiology models (Taghizadeh, et al., 2023).

The barriers among obese and overweight learners are the lack of support from the learner's family and community and low user adherence to obesity treatment were the said difficulties cited by the specialists (Lopes, 2020). In addition to this, participants who are overweight exhibit problematic eating habits like emotional eating and controlled eating as well as passive coping mechanisms like self-criticism, wishful thinking, and social disengagement at much greater rates (Varela, et al., 2020). According to the National Health Service (NHS) of the UK, "if you consume high amounts of energy, especially fat and sugars, without expelling the energy through exercise and physical activity, the body will store a significant portion of the surplus energy as fat." (Dela Peña, 2022). Furthermore, ABS-CBN (2023), claimed that obesity and overweight continue to be the country's worst problems and blamed the Filipinos' heredity, sedentary lifestyles, low levels of physical activity, and eating habits. Additionally, Bulusan and Ramos (2022), stated that obesity has been progressively increasing over the world in recent decades, and it has been blamed on the school atmosphere. However, after Agudo and Gutierrez (2021), compared obese learners with normal students, obese and overweight learners do not appear to perform differently than normal-weight students,

but they may be less pleased with life and their health state, have a lower body image, and are more likely to face social isolation and bullying. Obesity is common among Filipinos and is associated with a higher risk of hypertension, and diabetes (Toledano, et al., 2022). Gatillo, et al., 2022 stated that the obesity prevalence in the Philippines has gradually increased, with three out of every ten adult Filipinos being overweight or obese.

This study will address specific inquiries about the challenges that learners face concerning physical activity and the coping mechanisms they employ. The introductory segment serves to elucidate the prevalence of childhood obesity in the Philippines, citing contributing factors such as dietary habits, environmental influences, genetic predispositions, and the consequential gravity of health issues associated with obesity. Researchers emphasize the importance of understanding the challenges faced by learners struggling with obesity. Obese learners are observed to confront various impediments stemming from sedentary lifestyles, encompassing fatigue, mobility limitations, and respiratory difficulties during physical exertion. This study duly acknowledges the existence of both positive and negative coping mechanisms utilized by these learners, which encompass activities such as sketching, exercise, writing, stress-induced eating, and periods of physical inactivity. Moreover, this investigation delves into the repercussions of school environments, body image concerns, and social isolation on obese learners. Furthermore, it acknowledges the intricate nature of childhood obesity, recognizing individual characteristics and the influence of the things that a child is exposed to and experiences in their everyday life, the complex interplay between different environments in a child's life, and environmental factors that shape a child's development, even if the child is not directly involved in them, as contributing factors. In addition, this research discerns key rationales behind the difficulties faced by obese learners in participating in physical activities, including issues with weight management, a lack of enthusiasm, and discomfort. The researchers thoroughly discuss common impediments to physical activity in youth with excess body mass, such as

time constraints, personal barriers, and environmental factors, and their potential detrimental effects. Lastly, the study underscores the correlation between childhood obesity, suboptimal academic performance, and coping strategies, particularly about stress-related overeating. This research endeavour will comprehensively explore the intricate aspects of childhood obesity, shedding light on the barriers obese learners encounter and the strategies they employ within the specific context. This will contribute to a more profound comprehension of this critical health concern. The study is primarily centered on the issue of childhood obesity in the Philippines, with a comprehensive examination of its underlying causes, far-reaching consequences, and the specific challenges that obese learners encounter in their daily lives. While the study offers valuable insights into various facets of childhood obesity, it reveals significant gaps in our understanding of this complex problem. These gaps encompass a need for a more profound exploration of the psychological and emotional dimensions experienced by obese learners, including issues related to self-esteem, depression, and anxiety. Furthermore, the study could benefit from a more thorough investigation.
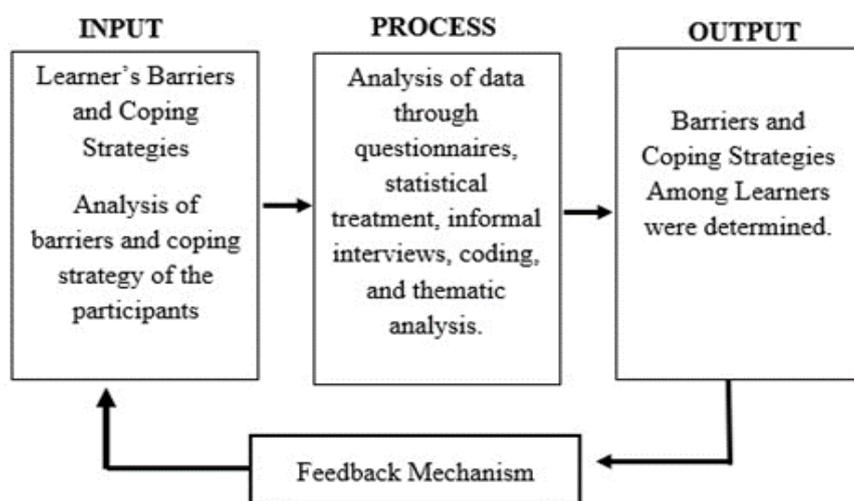

Figure 1: Paradigm of Study

The study adapted the Input-Process-Output framework. The first frame includes barriers and coping strategies of the respondents, while the second frame is about the analysis of data through questionnaires, statistical treatment, informal interviews, coding, and thematic analysis. The expected output of the barriers and coping strategies of learners were determined.

Statement of the Problem
Researchers aim to assess the barriers and coping strategies of the obese learners in one of the Public Senior Secondary Schools in the Cluster I Division of Pampanga during the curricular year 2023-2024.

Specifically, this study seeks to answer the following questions:

1. What are the barriers encountered by obese learners towards physical activities?
2. How may the coping strategies of the learners be described in terms of:
    2.1 social support;
    2.2 problem-solving; and
    2.3 avoidance?
3. Based on the quantitative data, what are the reasons behind those barriers and coping strategies towards physical activity of the learners?

The Significance of the Study
This study will be greatly important for the following:

Students. This study will provide and help students gain knowledge and understand the challenges and coping mechanisms faced by obese learners in a learning environment. It has

wider consequences for these children's long-term health and well-being in addition to addressing the acute academic and psychological difficulties they are currently facing. The study also has the potential to influence educational methods and policies that support all learners' holistic development, regardless of weight, encourage diversity, and enhance academic results.

Teachers. This study emphasizes the viewpoints of a teacher while attempting to promote inclusive and successful education for all children. By recognizing and addressing the difficulties faced by educators, they can seek to create a more understanding and encouraging educational environment that promotes the success of both instructors and obese learners.

Parents. The goal of this study is to advance the well-being, inclusion, and academic performance of these adolescents, and it emphasizes the parental viewpoint in doing so. They can try to create a more supportive and collaborative educational system that benefits obese and overweight learners and their families by recognizing the important role parents play and comprehending their experiences.

School Administrators. This study provides school administrators with insights into the challenges faced by obese and overweight learners, such as barriers and coping mechanisms. Armed with this knowledge, they can develop targeted support programs and interventions to improve the overall well-being of obese learners. By addressing these issues, administrators can create a more inclusive and supportive learning environment that promotes both physical and mental health.

Future Researchers. Future researchers can build upon this study by delving deeper into specific aspects of childhood obesity and its impact on academic performance and well-being. They can explore the effectiveness of various coping strategies and interventions in more detail. Additionally, this study highlights the need for longitudinal research to track the long-term outcomes of obese learners and the effectiveness of preventive measures. Such research can contribute to a better understanding of childhood obesity and inform evidence-based interventions.

Scope and Delimitation

The scope of study to one school and one specific topic, researchers can: develop a more nuanced understanding of the challenges and experiences of obese learners in that specific school setting, collect more in-depth data from a smaller group of participants, and design and implement a research methodology that is tailored to the specific needs of the study population. Additionally, by limiting the study to the curricular year 2023-2024, the researchers can ensure that the data collected is up-to-date and relevant. The delimitations of the study also play an important role in ensuring that the study is feasible. In this case, the delimitations are: the study will only be conducted in one public secondary school in the Cluster I Division of Pampanga, the study will only be conducted during the curricular year 2023-2024, it will only focus on obese and overweight learners, and will only focus on the barriers and coping strategies of obese and overweight learners towards physical activities. In this study, the first phase is the descriptive data collection on barriers and coping strategies among obese learners, while the second phase will be qualitative data collection and data analysis for further explanation of research variables.

The Definition of Terms

To widen the comprehension of this research, the researchers provided meaning for various terms in this study.

Barriers. Anything or anything that reduces quality or achievement, as well as the act of reducing the state of being reduced, or the cause of delay. There are many different types and origins of barriers. They may be transient or enduring (Baporikar, 2023). This term is like invisible walls that stand in the way of progress, preventing us from reaching our goals or accessing what we need. They can come in many forms, from physical obstacles to mental challenges or societal restrictions. Barriers often require creative problem-solving, determination, and resilience to overcome. This is anything that serves to restrict access or prevent progress.

Coping Strategies. In response to stressful situations, individuals mobilize their thoughts and behaviors to cope with the challenges,

whether these challenges originate from within or from the external environment (Algorani et al., 2023). Coping strategies are like tools in our mental toolbox that help us navigate and manage difficult situations or emotions. These strategies can be actions, thoughts, or behaviors we use to deal with stress, adversity, or challenges healthily and effectively. They serve as our techniques for finding balance, resilience, and emotional well-being in the face of life's ups and downs.

Learners. A learner is a person who is actively engaged in the process of acquiring new knowledge or skills. It is broad term encompassing anyone actively acquiring knowledge or skills (Helmond, 2018). It refers to people who seek to expand their knowledge and skills.

Obesity. An abnormal or excessive fat accumulation presents a risk to health (World Health Organization, 2021). It refers to the overall body mass index of an individual ranging from 30 above.

Overweight. A BMI between 25 and 29.9 is considered overweight for adults (Mana Medical Associates, 2023). It refers to carrying extra pounds that can put their health at risk.

Method
Research Design
Sequential-explanatory was used in this study to combine quantitative and qualitative data. This approach merges quantitative and qualitative research techniques within a single study. It leverages the strengths of both methods to achieve a more comprehensive and nuanced understanding of the research topic. Quantitative data (numerical data) provides measurable results, while qualitative data (descriptive data) offers deeper insights into participants' experiences and perspectives. By combining these data forms and analyses, researchers gain a richer and more complete picture of the phenomenon under investigation. (Clark, 2019).
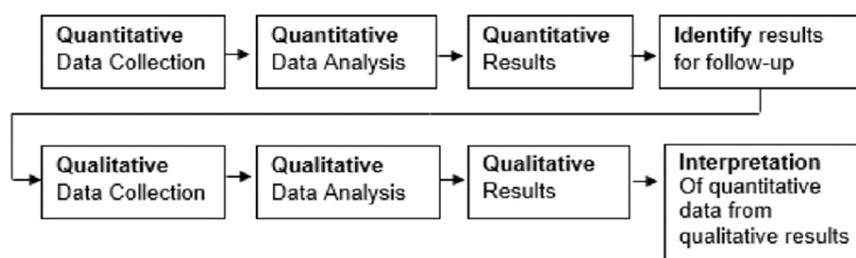

Figure 2. The explanatory follow-up model of the sequential explanatory design

The study utilized a mixed-method approach to explore the barriers and coping mechanisms encountered by obese learners, as it offers a clear understanding of these challenges. To address the research question, mixed methods research integrates elements of qualitative and quantitative research. By combining the strengths of both methods, mixed methods enable researchers in obtaining a more comprehensive picture than a single quantitative or qualitative study (George, 2021). Explanatory research tackles situations where we have limited knowledge about a phenomenon. It goes beyond simply describing what's happening and digs into the underlying causes (George & Merkus, 2021)

The study consists of two phases: quantitative and qualitative. The first phase of the study began with the collection and analysis of quantitative data from one of the Public Senior High Schools in the Cluster 1 Division of Pampanga. The assessment utilizes the Statistical Package for the Social Sciences (SPSS) and standard deviation.

Building upon the qualitative findings, the second phase involves data analysis to clarify, explain, and interpret the data collected from the respondents' responses. This phase utilizes the qualitative interpretation of the quantitative results obtained from the respondents' data.

Respondents/Participants
The respondents of the study are the obese and overweight Senior High School learners who have a BMI reaching 25.0 and above in one

of the Public Secondary Schools in the Cluster 1 Division of Pampanga during the school year 2023 to 2024. The researchers used a total enumeration for the first phase of the study.

In the qualitative phase, researchers targeted the participants identified as outliers in the quantitative data. Students in these individuals, whose responses deviated significantly from the norm, offer unique insights into the study's topic. Face-to-face interviews are conducted to delve deeper into their experiences and gain a richer understanding of their perspectives.

Sampling Method
The study's initial phase used the approach of total enumeration sampling. With this kind of sampling, every member of a population possessing a particular attribute is included in the research (Canonizado, 2021).

Homogeneous sampling was used in this phase. This sampling focuses on a group with similar characteristics. This narrows down the range of experiences examined, allowing for a deeper dive into the specificities of that subgroup and simplifying the analysis process (Nikolopoulou, 2023).

Instrument
Phase 1 Quantitative
To gather quantitative and qualitative information on the obstacles and coping strategies faced by obese and overweight learners, the study used a standardized questionnaire as cited in the study of Dominado, (2021). The instrument used to achieve the investigation's main goal. The respondents received duplicates of a self-directed questionnaire. There were two sections to the questionnaire. The assessment of the respondents' experiences with barriers posed by obese and overweight learners makes up Part I. To determine the internal consistency reliability of the results, and it yielded respectable scores of .792 for exterior barriers and .794 for internal obstacles, the Cronbach alpha test is used. It is used to measure the difficulties that respondents faced and was based on the barriers created. The second section of the study focuses on the respondents' coping mechanisms, particularly their use of social support, problem-solving skills, and

avoidance of obese learners. The Cronbach alpha test is used to determine the internal consistency reliability of scores, and it gives social support a good score of .928; problem-solving a good score of .894; and avoidance a good score of .839 as a result. The coping strategy of the respondents is measured using the limited coping strategy devised by Amirkhan in 1990.

Phase 2 Qualitative
The instrument utilized for the qualitative portion of the study was based on the quantitative phase's questionnaire, which has an interpretation of the respondents' outlier or extreme responses. The respondents are allowed to take the lead in developing and articulating their ideas and focus their responses on areas they felt were important. This provided the researcher with fresh and important information that improved the study that was being conducted.

Building on the findings from the quantitative phase, follow-up interview protocol guides are conducted to delve deeper into participants' experiences. The interview protocol guide is viewed as a guide for the interview; what to say at the beginning of the interview, the topic of the interview, how to collect the participants' consent, interview questions, and what to say when ending the interview. Interviews are held at a mutually agreed-upon location that lasted approximately 10-15 minutes, allowing space for open-ended discussion and exploration of individual perspectives. Interview is a structured dialogue typically initiated by an interviewer with the objective of gathering information, appraising qualifications, or gauging a candidate's compatibility for a particular role, acceptance, or other designated purpose (Puri, 2023). The interview sequence established a rapport by building understanding, acquiring informed consent, and familiarizing researchers with participants' backgrounds. Next, researchers delved into participants' experiences using targeted questions constructed based on the quantitative phase's conclusions

On the qualitative part, it leverages the existing questionnaire from the quantitative study as a foundation. However, the focus shifts to participants whose responses differed significantly from the norm (outliers). By

engaging them in open-ended discussions, researchers aim to delve deeper into their unique experiences and perspectives. This personalized approach encourages participants to elaborate freely, enriching the study with valuable insights to refine and deepen its understanding of the topic.

Data Collection
Phase 1: Quantitative

Prior to data collection, researchers obtained consent from one of the public senior secondary schools in the Cluster 1 Division of Pampanga to conduct the study. Data collection started during the first week of the second grading following approval. The researchers provided the respondents with an in-person explanation of the study.

Primary data were the only data source for the study. A unique or first-hand data source in which the respondents themselves provided the researchers with the data is referred to as "primary data." The information for surveys for this study are gathered using Google Forms.

Phase 2: Qualitative

In the qualitative part, researchers obtained official approval through a letter request for interview questionnaire validation. Leveraging insights from the quantitative findings, researchers then conducted interviews with the participants, allowing them to freely share their perspectives on the topic. This open dialogue aims to gain a deeper understanding of the barriers and coping strategies faced by overweight and obese learners. By cross-validating participant responses and integrating both quantitative and qualitative data, the researchers hope to paint a more comprehensive picture of the challenges and solutions at hand.

The researchers also prepared the interview questionnaires that are validated by the teacher-advisor using the validation tool presented. Researchers delved deeper into the experiences of participants whose responses fall significantly outside the norm – considered outliers based on Lemonaki's (2021) definition. These individuals, often referred to as outliers, represent data points that deviate remarkably from the majority. Open-ended interviews provided an opportunity to explore their unique perspectives and gain richer insights into the study's topic.

Beyond capturing spoken words, the interview phase delved deeper by observing nonverbal cues like intonation, facial expressions, and even the interview setting itself. This holistic approach allows participants to freely elaborate and share their genuine insights, enriching their responses. With their permission, audio recordings document these valuable exchanges, later transcribed for meticulous analysis. Key points are extracted, labelled, and compared across responses to ensure comprehensive understanding of teachers' perspectives. Combining quantitative and qualitative data, paints a richer and more nuanced picture of the challenges and coping strategies faced by obese and overweight learners.

Building upon the initial insights gleaned from the quantitative phase, the study shifts its focus to participants whose responses diverged significantly from the majority, known as outliers. These individuals, carefully selected based on predefined criteria, and are be invited to engage in face-to-face to offer their unique perspectives. To ensure a comprehensive analysis, these interviews were meticulously audio-recorded and transcribed verbatim, capturing every nuance of their responses. Each interview was anticipated to last around 10-15 minutes, and as a token of appreciation, all participants will receive a heartfelt letter of gratitude to acknowledge their invaluable contribution.
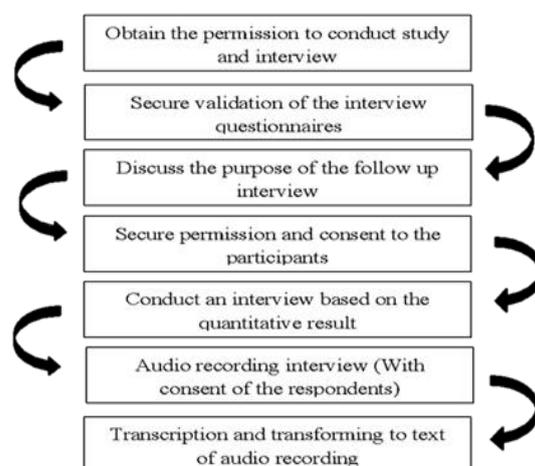
Figure 3. Qualitative data gathering process used in the study

Statistical Treatment/Data Analysis
Phase 1. Quantitative
The researchers used two procedures in analysing the data. The information gathered are arranged and prepared through a Google form. In addition, one formula is used to facilitate the analysis and interpretation of the results on the gathered data.

The researchers used SPSS to compute the weighted mean of the gathered data. The assessment of the respondents whether the information focused, in general, is near the mean or information points tend to be spread out a wider range of values is subjected to the computation of standard deviation. The standard deviation will be a proportion of the spread of scores inside a bunch of information.

The following statistical treatment shall be used for data analysis:
1. Frequency. This refers to the number of occurrences of a repeating event in a particular time.
2. Arithmetic Mean. This refers to the sum of the collection of numbers divided by the count of numbers in the collection.
3. Pearson's r. This is a measure of linear correlation between two sets of data.

Phase 2: Qualitative
The qualitative analysis phase utilized thematic analysis to refine and interpret participant responses. This involved translating the quantitative data into qualitative interpretations, primarily through interview transcripts. Key points were extracted and coded, then grouped into thematic concepts based on shared meanings. These themes provided deeper understanding and enriched the overall study.

According to Crosley (2021), reflexive thematic analysis is a method for identifying the patterns within a data set. By analysing these patterns, they aim to uncover the underlying meaning or significance of the data.

Ethical Consideration
This study followed strong moral standards that are acknowledged and put into practice. By using IDs or pseudonyms, the participants' confidentiality was protected. The respondents received detailed explanations of the study's goals, methods, and findings. It was stated that participation in the study was voluntary and that there was no monetary reward. The principal of the school also provided certification. Additionally, consent from the participants' parents was required for them to take part in this study. Study participants signed informed consent documents. The material and statistics were accurate, authentic, confirmed by participants, peer-debriefed, and free of fictitious information or results.

Result and Discussion

Table 1. Barriers Among Obese and Overweight Learners

BARRIERS	MEAN	VERBAL DESCRIPTION
1. I do not feel that I have the ability to exercise at a sufficient level for it to be worthwhile.	2.88	Moderately High
2. I have a fear of injury (or re-injury).	2.5	Moderately High
3. I have a fear of making an existing illness worse.	3.06	Moderately High
4. I have lack of energy.	2.96	Moderately High
5. How I see my body.	3.23	Moderately High
6. I keep talking myself out of it.	3.04	Moderately High
7. I know that I cannot achieve the results that I want, so why bother?	2.77	Moderately High
8. I have lack or low physical power.	2.87	Moderately High
9. I have lack motivation.	3.19	Moderately High
10. I feel pain whenever I exercise.	2.63	Moderately High
11. I am unable to find inexpensive physical activity.	2.65	Moderately High
12. Failure to achieve goals in previous attempts to become active.	3.15	Moderately High
13. Feeling uncomfortable (intimidated in exercise surroundings).	2.79	Moderately High
14. Have other areas in my life that I feel must take priority in my life.	3.42	Moderately High
15. Lack of available and sustainable programs up my level.	2.96	Moderately High
16. Lack of access to opportunities such as nearby facilities.	2.73	Moderately High
17. Lack of partner.	2.96	Moderately High
18. Lack of child care.	2.25	Moderately High
19. Lack of knowledge.	2.60	Moderately High
20. Lack of safe spaces.	2.83	Moderately High
21. Lack of skills.	2.96	Moderately High
22. Lack of support from others.	3.04	Moderately High
23. Lack of time.	3.52	Moderately High
24. Lack of transportation.	2.69	Moderately High
25. Previous negative experience with physical activities.	2.83	Moderately High
26. Unsuitable (hot or cold) weather.	2.92	Moderately High

There were twenty-six barrier indicators listed in the questionnaire. The most verbal description cited was "Moderately High". Similar to the result of Dominado (2021), "Lack of time" got the highest verbal description. The statement, "Lack of time" with the highest mean of 3.52, "Have other areas of their life that they feel must take priority in my life" garnered a 3.42 mean value, and "How they see their body" with a 3.23 mean value. While, the statement "Lack of childcare" accumulated the lowest mean of 2.25 with the statement "They have a fear of injury (or re-injury)" who accumulated the mean 2.5, and the statement "Lack of knowledge" got the mean value of 2.60. The verbal description of the barriers of the obese and overweight learners was "Moderately High".

Simply put, this shows that the learners' busy schedules, prioritization of other tasks, and negative self-perception of their bodies served as obstacles to physical activity for the obese and overweight learners. It shows that learners have other priorities they must take in life, especially if they are learners and are busy with their academics. Furthermore, obese and overweight learners tend to be more conscious about their physical appearance, such as how they look in front of other people.

As per the Centers for Disease Control and Prevention (2020), many people were prevented from engaging in physical exercise due to many reasons such as inadequate skills, fear of injury, lack of enthusiasm, time constraints, discomfort, physical power, and energy.

2.1 Social Support
Social Support

The weighted mean and verbal description of coping strategy indicator specifically social support. In terms of social support, there were eleven markers of coping strategies highlighted. The statement, "Described their feelings to a friend" with the highest mean value of 3.71, followed by "Told people about the situation because talking about it helped them come up with a solution" which garnered a 3.62 mean value, and the statement "Talked to people about the situation because talking about it made them feel better", which receives 3.60 mean value. The verbal description cited was "High". On the other hand, the statement "Went

to a friend for advice about how to change the situation" got the lowest mean value of 3.23, including the statement, "Went to a friend and help you feel better about the problem" which garnered 3.29 mean value, and the statement "Went to someone's friend or professional to help you feel better" with 3.35 mean value. The verbal description of this coping technique indicator's social support level is "Moderately High."

This implies that when it comes to social support, the majority of learners would rather talk to and rely on their friends. In addition, they believe that friends bring comfort and a safe space for them to open up and tell their worries, thoughts, and feelings. Furthermore, telling people about their situation helps them decide because their opinions serve as their guide to deciding. However, obese and overweight learners tend to only hear advice, but they will not do it. They only want to be in a comfort zone but tend to not do anything about the problem.

Table 2. Coping Strategies Among Obese and Overweight Learners

INDICATOR	MEAN	VERBAL DESCRIPION
Social Support		
1. Describe your feelings to a friend.	3.71	High
2. Accepted sympathy and understanding from someone	3.63	High
3. Talk to people about the situation because talking about it made me feel better.	3.60	High
4. Talked about fears and worries to a relative or a friend.	3.46	High
5. Told people about the situation because talking about it helped you come up with solution.	3.62	High
6. Went to someone's friend or professional to help you feel better.	3.35	Moderately High
7. Went to a friend and help you feel better about the problem.	3.29	Moderately High
8. Went to a friend for advice about how to change the situation.	3.23	Moderately High
9. Accepted sympathy and understanding from friends who had the same problem.	3.38	Moderately High
10. Accepted help from a friend or relative.	3.48	High
11. Sought reassurance from those who know you best.	3.56	High

2.2 Problem Solving

INDICATOR	MEAN	VERBAL DESCRIPION
Problem Solving		
1. Rearranged things so your problems be solved.	3.71	High
2. Thought of many ideas before deciding what to do.	3.87	High
3. Set some goals for yourself to deal with the situation.	3.71	High
4. Weighed up your options carefully.	3.71	High
5. Tried different ways to solve the problem until you found one that works.	3.63	High
6. Thought about what needs to be done to strengthen things up.	3.58	High
7. Turned your full attention to solving the problem.	3.79	High
8. Formed a plan in your mind.	4	High
9. Stood fair and fought for what you wanted in the situation.	3.44	High
10. Tried to solve the problem.	3.83	High
11. Tried to carefully plan a course of action, rather than acting on impulse.	3.90	High

Problem-Solving

The data listed eleven coping strategy indicators in terms of problem-solving and all the indicators found that were at "High" as coping strategy by the respondents were "Formed a plan in their mind" has the highest mean of 4, including the statement, "tried to carefully plan

a course of action, rather than acting on impulse" which receives 3.90 mean value, and the statement "turned their full attention to solving the problem" with the mean value of 3.87. The verbal description cited was "High". While, the statement "Stood fair and fought for what you wanted in the situation" collected the lowest mean value of 3.44, including "Thought about what needs to be done to strengthen things up" with a 3.58 mean value, and "Tried different ways to solve the problem until you found one that works" with the mean value of 3.63. This coping technique indication has a verbal description of "High" when it comes to problem-solving.

The information provided demonstrates that the learners were formulating plans, establishing objectives, and coming up with creative solutions to the issue. This simply means that obese and overweight learners are highly focused on what goal they have set their minds in to. However, they doubt their selves and tend to not believe in what they can do.

Furthermore, the learners' problem-solving abilities were shown to be highly significant in their lives by (Nopembri et al., 2019), who also noted that having developed problem-solving abilities will enable learners to come up with practical solutions for obstacles to physical exercise.

2.3 Avoidance

INDICATOR	MEAN	VERBAL DESCRIPION
Avoidance		
1. Tried to distract yourself from the problem.	3.13	Moderately High
2. Did all you could to keep others seeing bad things really were.	3.02	Moderately High
3. Daydreamed about better times.	3.81	High
4. Spent more time than usual alone,	3.69	High
5. Watched television more than usual.	2.54	Low
6. Avoided being with people in general.	3.04	Moderately High
7. Buried yourself in a hobby or sports activity to avoid the problem.	3.44	High
8. Slept more than usual.	2.98	Moderately High
9. Fantasized about how things could have been different.	3.56	High
10. Identified with characters in movies or novels.	3.27	Moderately High
11. Wished the people would just leave you alone.	3.13	Moderately High

Avoidance

In the avoidance, there were eleven listed indicators in the questionnaire. The statement, "Daydreamed about better times" which garnered the highest mean of 3.81, "spent more time than usual alone" with 3.69 mean value, and "fantasized about how things could have been different" with the mean value of 3.56. The verbal description was interpreted as "High". However, "Watched television more than usual" got the lowest mean value of 2.54, including the statement "slept more than usual" with a 2.98 mean value, and "Did all they could to keep others saying bad things were" with 3.02 mean value and interpreted as "Low" in the verbal description.

This indicates that, as a coping mechanism for avoidance, the learners frequently imagine how things may have been different. They are also those lonely people who spend most of their time alone, fantasizing about how things could have been different. However, some of them don't watch too much television or sleep that much. Additionally, some of them do not care about the bad things that other people say.

As proof, respondents have a higher tendency to wish themselves well, fantasizing about how they may have changed things sooner (Varela, 2019).

Sequential Explanatory Data on the Barriers and Coping Strategies Towards Physical Activity of the Learners

Following the quantitative revelation of low confidence among overweight and obese students, the research turns qualitatively to explore the "why" through in-depth interviews. This involves dissecting experiences of causes and barriers (whether social, economic or personal) to low levels of physical activity. By

detailing their internal dimensions, structure, and how trust affects those systems, researchers have aimed to understand the potential negative consequences in addition to affecting their support systems (peer, family, etc.) to identify possibilities and areas for intervention, it seeks how to establish the "why" of targeted interventions and support programs that address challenges which these students face, encourages quality of life, and strengthens their self-esteem.

Qualitative Findings

The results presented are according to the statement of the problem that was given in chapter 1. The specific order follows Barriers to Physical and Mental Well-Being, Strategies to Physical and Mental Well-Being, and Programs that may or can help obese and overweight learners to engage more in physical activity.

The data provided were based on the opinion of the obese and overweight learners in one of the public senior high schools in Cluster 1, Division of Pampanga. Their answers imply that their weight affects the participants' self-esteem. In addition, this suggests that learners have strategies to overcome their physical barriers. That being said, this suggests different strategies as coping mechanisms.

Barriers to Physical and Mental Well-being

The emerging concepts are struggles, body shaming, insecurity, inconsistency, bullying, hard time, challenge, compare, negative thoughts, laziness, social anxiety, lose weight, financial, and avoidance.

Based on the narrative of the participants, the students have their own struggles that they face every day, in terms of their physical and mental well-being. However, there were some cases where in learners will somehow feel motivated to engage with physical activity, especially if money is related. In addition to that, most of the time, because of their workloads and sedentary lifestyle, they are more likely to be inconsistent or just completely stop.

According to the responses of the participants, it suggests that obese and overweight learners tend to be the center of mockery. It also delves about the impacts and struggles of being and obese and overweight learner, not only in physical form, but also in their mental well-being.

The struggles of an obese and overweight in terms of physical and mental well-being come in various forms. It can be in the form of body shaming where in people can draw negative attention to someone's body shape or size (Medical News Today, 2023). In addition, obese and overweight learners tend to isolate themselves in the fear of exposing themselves to other people because they are vulnerable to judgements, such as in the form name calling. This is a tool used to insult or make fun of someone. That being said, obese and overweight learners tend to be the target of ridicule, which contributes to the main reason why their self-esteem seems to be very low. In addition, Obese and overweight learners may also isolate themselves due to societal stigma, low self-esteem, depression, physical limitations, or bullying (Centers for Disease Control and Prevention, 2023). In terms of finding the right size for their clothes, because of the norms and standards, their options are not that wide. Insecurities can also arise at any moment because most of the obese and overweight learners have low self-esteem. Obese and overweight also suffers from being conscious and body dysmorphia because some people kept on pointing out and compering their weight to other people. However, some of them chose to ignore the ridicules to protect their peace of mind.

Struggles

(Bullying, and being compared to others.) "Bully, at yung kino compare ako sa iba." OOL a2

(When I get bullied, my self-confidence goes down.) "Pag na bbully kase pag ganon bumababa self-confidence ko." OOL a3

(When I was in first grade, I was bullied, especially by my classmates. They would call me a pig and say that I'm very fat.) "Nung grade1 ako, binubully ako lalo na yung mga kalaro ko, sinasabi na sakin baboy, ang taba taba ko." OOL a2.2

(If it's based on people like us who are struggling in this kind of situation, and if those implementing the program have sufficient knowledge about it.) "Kung naka based sya mga taong katulad namin na nag sstruggle sa gantong situation. Tyaka kung yung mga nagpapatupad ng program ay may sapat na knowledge regarding doon." OOL a5.6

(I'm afraid to face people because I'm not physically fit.) "Takot akong humarap sa mga tao dahil hindi ako physically fit." OOL a3.8

(When it comes to clothes, it's difficult to find the right size.) "Yung pagdating sa damit, mahirap humanap ng size." OOL a3.2

Body Shaming

(When it comes to interacting with others, sometimes when I'm talking to someone, I feel like they're judging me because of my weight.) "Yung pakikipag interact ko, kapag kasi kunwari may kausap ako tapos feeling ko jinajudge nila ako because of my weight." OOL a3.4

(I feel shy whenever I interact or talk to other people because I feel like they're judging me because of my weight.) "Yun nga, nahihiya na'kong makipag interact, makipag usap sa iba kasi nga feeling ko jinajudge nila ako because of my weight." OOL a1.5

(It's like what people say, like how big I am.) "Yung mga sinasabi ng mga tao, yung ang laki ko raw." OOL a3.5

(So, a lot of times people judge you based on your weight. Every time I do a physical activity and they are looking, their eyes, it's like because of that, my self-confidence goes down.) "So, a lot of times dipende sa timbang mo kaya ka jinajudge ng ibang tao so from time-to-time na gumagawa ako ng physical activity tas naka tingin sila, yung mata nila so parang dahil don bumababa ang self-confidence ko." OOL a1.7

Insecurity

(I feel insecure.) "Na iinsecure ako." OOL a1

(I get insecure with others.) "Ma iinsecure ku kareng alwa." OOL a1.3

(Based on my experience, I think my confidence was most affected by my weight when I was called out. My relatives would tell me that it seems like I'm gaining weight, and since I'm conscious about myself and my weight, their words affected me. Because of this, I developed body dysmorphia, or a distorted perception of my weight and myself. As for my confidence, when I speak in front or present something, I become conscious about my physical appearance. Like, what if people say this? What if I'm actually fat? What if there's something wrong with my body composition?) "Siguro sa experience ko, pinaka naapektuhan ang confidence ko dahil sa weight ko nung naranasan kong ma call out. Sinasabihan ako ng mga kamag anak ko na parang tumataba ako, syempre since concious ako sa sarili ko ang concious din ako sa timbang ko, medyo na apektuhan ako sa sinabi nila and dahil don parang nagka develop ako ng body dysmorphia or parang nag iiba yung tingin ko sa weight ko, sa sarili ko. Sa confidence ko naman, pag nagsasalita ka sa harap or nag pepresent, nagiging concious ako sa physical appearance ko. Like, what if ganto sabihin ng mga tao? what if mataba pala ako? What if may mali sa body composition ko?" OOL a1.6

Inconsistency

(I keep trying to work out, but because I have a lot to do, it's hard for me to be consistent.) "Ulit ulit ku mag work out pero dahil pin gagawan eku maging consistent." OOL a3.3

Bullying

(Because I get bullied due to my weight, my confidence goes down.) "Dahil nga nabubully ako dahil sa timbang ko

kaya yung confidence ko bumababa." OOL a1.8

(One of the challenges I've faced is bullying.) "Isa na yung pang bbully nila sakin." OOL a2.8

Hard Time
(Like, when you're buying clothes, it's like you're having a hard time, myself is having a hard time, my self-confidence gets really low.), "Parang yung pagbili ng mga damit, parang nahihirapan ka, parang nahihirapan yung sarili ko kaya bumababa self-confidence ko." OOL a1.2

Challenge
(I guess the biggest challenge I faced in being physically active was when I tried to create an intervention plan in grade 11 on how to become physically fit.) "Siguro yung pinaka malaking challenge na naransan ko sa pagiging physically active nung tinry kong gumawa ng intervention plan nung gr11, kung paano maging physically fit." OOL a2.6

Compare
(When they compare me to others, of course, it makes me think about my physical appearance too.) "Pag kukumpara daku syempre mangapaisip ku rin king physical ku." OOL a2.3

Negative Thoughts
(My self-confidence got really low because I can't avoid the negative thoughts of other people.) "Bumababa yung self-confidence ko dahil hindi maiiwasan yung mga negative thoughts ng mga tao." OOL a1.4

Laziness
(Just like wanting to work out, but my laziness always gets in the way.)" Kagaya ng gusto ko mag work out kaso mas nauuna yung katamaran ko." OOL a2.5

Social Anxiety
(I've experienced that since grade 11 until now, there are times in the classroom when there's recitation or an activity where you have to answer. Sometimes, I don't pay much attention to it because even though I've improved my self-esteem and self-confidence, there are still moments when I remember how I struggled or had social anxiety because of my appearance, especially my weight back then.) "Naranasan ko naman yon nung grade 11 ako hanggang ngayon na kapag may mga times na sa loob ng classroom may recitation, may activity na kailangan mong sumagot minsan hindi ko masyadong nabibigyan ng pansin yon kase minsan ket sabihin kong nag iimprove naman yung self-esteem and self-confidence ko may mga oras pa rin na naaalala ko kung paano ako maghirap or makaroon ng social anxiety dahil sa appearance ko lalo na sa weight ko noon." OOL a3.6

Lose Weight
(Losing weight, so that I will not be bullied anymore, and being able to wear what I want, like a tank top.) "Pumayat, yung di na nabbully and nakakapag suot na ng gustong suotin like sando." OOL a6

(Anything that can help me to lose weight.) "Basta makakatulong sakin na mapababa weight ko." OOL a5.2

(Losing weight, so that I will not get shy to face people) "Pagbaba ng weight. Di na'ko mahihiyang humarap sa mga tao." OOL a6.2

(Hoping I'll lose weight in the future so that I can wear whatever I want. By that, I can boost my self-confidence.) "Sana payat ku in the future kasi asulud muna ing buri mung sulud dahilkarin tatas ku self-confidence." OOL a6.3

Financial
(If there's a prize, like money.) "Kung may premyo, like pera." OOL a5

(If there's money.) "Kung may pera" OOL a5.5

Avoidance

(I think the challenges I've experienced are related to bullying. They try to make it seem like a joke, so I didn't pay attention to those things. I just told to myself, "Oh, it's nothing, just ignore it.) "Siguro yung mga challenges na naranasan ko are ano yung pang bbully. Ginagawa kasi nilang pabiro yung pang bbully nila so hindi ko pinansin yung mga yon, sinabi ko nalang sa sarili ko na "ah wala lang yoon ganito ganyan" OOL a2.4*

(My aunties, since then they always tell me to "just ignore them" because it's in our genes.) "Yung mga tita ko, simula bata pa ako sinasabi na nila sakin na "wag mo nang pansinin yan" dahil nga nasal ahi ang pagiging mataba.) OOL a4.2

Strategies for Physical and Mental Well-being

The emerging concepts are motivation, determined, peer support, equal treatment, companionship, self-acceptance, and discipline.

According to the responses of the participants, it implies that they were highly dependent to their peers because it motivates and support them to engage with physical education, such as going to the gym. In addition, the comfort they receive from their friends, it makes them feel belong and accept themselves for who they are.

Obesity can significantly impact a person's mental well-being, leading to depression, emotional problems, behavioral issues, low self-esteem, trouble with motivation, unhealthy eating habits, and a distorted body image. These factors can further complicate weight management, suggesting a more comprehensive approach might be necessary to achieve lasting results (Chu, et.al, 2019). However, obese and overweight learners tend to feel motivated when they have their friends by their side to support them. Some of them may have felt more determined to lose weight and engage in physical activity because of the support and encouragement they get from their friends and the determination to make a better version of themselves. Additionally, because of the discouragements and judgments they receive from other people, obese and overweight learners make use of those as a reason to lose weight. Discrimination and bias are some of the daily struggles they face (Varela, et.al, 2020). Because of that, the equal treatment they receive from their friends is a factor that can make them feel more included and motivated to engage in physical activity and improve themselves. Although they may be sometimes dependent on their friends and peers, it helps them accept who they are. Being surrounded by people who accept you for without judgements creates a comforting space.

Motivated

(My friends. They became my motivation.) "Mga kaibigan ko. Sila yung nagging motivation ko." OOL a4

(Actually, those who bad mouth me made me realize that I need to change myself or my body composition.) "Actually, reng sinabi kakung matsura ilang mekasawup kaku dahil a realize kung kailangan ku baywan ing sarili ku ot katawan ku." OOL a4.3

(Anything that can help me to lose weight because it will motivate you if you see there's something changes to your weight.) "Basta related king pagbabawas ning weight kasi pag akakit mung mababawasan ka timbang mas ma mmotivate kang mag exercise." OOL a5.3

(I hope I reach a point where I have the motivation to lose weight. Right now, I weigh 80 kilos, and I hope to reach 50 kilos.) "Sana dumating ako sa point na magkaroon ako ng sipag para magpapayat. Ngayon kase 80 kilos ako sana maging 50." OOL a6.5

Determined

(Being determined to become physically fit will increase my self-confidence) "Maging pursigido para maging physically fit and tataas yung self-confidence." OOL a6.4*

(There is nothing, it doesn't really affect my self-confidence.) "Wala naman, hindi naman masyadong naapektuhan yung ano ko." OOL a3.7

(Ever since my dad started saying those things to me, I felt like I wanted to engage in physical activities not only for my mental health but also for my physical well-being.) "Ever since yung kay tatay na sinasabihan nya ako ng ganon parang gusto ko maging engage sa physical related activities para not only for my mental health but for my physical well-being also." OOL a5.7

(I want to achieve a physically active body in a way that I can help other people, not just by helping them but also by helping myself and being able to defend and be proud of myself. To further improve my physical well-being, I need to become consistent.) "I want to achieve a physically active body in a way na makakatulong ako ibang tao hindi lang yung matutulungan ko sila but also myself and ma ddefend at maipag mamalaki ko yung sarili ko. Para ma improve pa yung physical well-being ko I need to become consistent." OOL a6.7

(I want to become physically fit so that my self-confidence will increase and I can wear the clothes that I like.) "Maging physically fit para tumaas na and self-confidence ko at makapag suot ng mga damit na gusto ko." OOL a6.8

Peer Support

(It's just my friends who always cheering me up because even my own family is dragging me down.) "Mga kaibigan ko lang mga nag ccheer up saken kase mismong fam ko dina down ako." OOL a4.5

(The people close to me, my friends since grade 7 until now, especially during the pandemic, I often open up to them about this. That's why sometimes I'm not worrying that everyone I meet or talk to judges based on physical appearance. It

helps me to be calm in accepting myself.) "Yung mga taong malapit saken, yung mga kaibigan ko mula grade7 hanggang ngayon. Lalo na nung pandemic madalas akong mag open sakanila about dito kaya minsan nawawala yung worry ko na lahat ng taong nakikilala or nakaka usap is nag bbased sila physical appearance. Kaya nagiging kalmado ako sa pagtanggap sa sarili ko." OOL a4.6

(My mom and dad didn't support me by encouraging me, but rather by showing me reality. My dad wasn't very strict back then. There were times when they needed my help, we had tasks to do at home, and my dad would make me lift heavy things that I couldn't handle. Because of that, I was criticized, "You have a big body, but you can't lift or help properly." After that, I was inspired to become physically active.) "Yung nanay at tatay ko kase they didn't support me by encouraging me with which rather showing me reality. Kase yung tatay ko non hindi siya very strict man. May times kase non na kailangan nila yung tulong ko, meron kaming pinapagawa non sa bahay then yung tatay ko ginawa niya is pinapabuhat nya ako ng mga mabibigat but hindi ko mabuhat yung mga yon kaya dahil don napaglitan ako "ang laki ng katawan mo, pero hindi ka maka buhat, hindi ka makatulong nang maayos" after that na inspired ako na maging physically active." OOL a4.7

(My friends. I was motivated because they go to gym.) "Mga kaibigan ko. Dahil nag ggym sila, na motivate na rin akong sumali." OOL a4.8

Equal Treatment

(My friends now, since many of them have bodies that are considered "normal," they still treat me as an equal and don't judge me.) "Yung mga kaibigan ko ngayon since marami kase sakanila na sakto lang yung katawan nila tapos parang tinitreat parin nila akong equal like hindi sila marunong manghusga." OOL a4.4

Companionship

(If I do it alone, I can't. But if I have someone with me working out, I can.) "Siguro kung pag wwork out kase kung ako lang mag isa, hindi ko kaya." OOL a5.4

Self-Acceptance

(Since I am surrounded by people who accept me physically, maybe if there's anything I need to change, it's my self-acceptance. And of course, if I improve how I see myself, my self-confidence will improve.) "Since napapalibutan naman ako ng mga taong tanggap ako physically siguro kung may babaguhin man ako siguro yun na yung pagtanggap ko sa sarili ko and syempre kung mag iimprove yung tingin ko sa sarili ko mas tataas yung self-confidence ko." OOL a.6.6

Discipline

(Definitely, being physically active takes a mental challenge, it's not just something you can easily do. For example, if you want to be physically active, you can't just become physically active, you have to discipline yourself to become physically active. Especially during the pandemic, that's how I was. I started working out, but it took me a while before I became physically active.) "Definitely, yung pagiging active physically it takes mental challenge hindi lang basta basta. For example, gusto mo maging physically active, you can't just become physically active you have to discipline yourself para maging physically active. Lalo ng nung pandemic ganyan ako e, nag wwork out ako non pero it took me a while bago naging physically active." OOL a2.7

Sports

The emerging concept is sports.

Based on the responses of the obese and overweight learners, it was mentioned that if there were programs that will make them engage with physical activity, it would be a program, such as sports. It's evident how sports can make a person be physically fit. In addition, some sports might be more accessible or appealing to obese or overweight learners than others and since sports involve physical activity, they burn calories and might help with weight management, which can encourage learners to engage with physical activities.

According to the study by Vincent et al. (2018), suggests the critical role of enjoyment in exercise adherence for obese and overweight individuals. Their research suggests that choosing activities that align with personal interests fosters long-term participation. When exercise feels enjoyable rather than a chore, individuals are more likely to look forward to workouts and integrate them seamlessly into their routines. This is particularly significant for those who may be new to exercise or harbor negative past experiences with physical activity. Prioritizing enjoyment lays the foundation for a sustainable approach to fitness, keeping individuals motivated and on track towards achieving their health objectives.

Program

(If it's about sports.) "Kung sports siguro" OOL a5.8

Summary

1. "Lack of time" emerged as the biggest barrier to physical activity, followed by competing priorities and negative body image. These findings align with broader research highlighting time constraints, lack of motivation, and self-consciousness as common obstacles to exercise for those struggling with weight issues.
2. Coping strategy
   a. Social support from friends appears to be the preferred coping strategy for overweight and obese learners, the analysis suggests a tendency to lean on emotional comfort rather than actively seeking solutions. They favour sharing feelings and receiving understanding over direct advice or taking concrete action. This aligns with existing research highlighting the importance of friends as a source of comfort and encouragement for those struggling with weight issues.
   b. Overweight and obese learners favor internal problem-solving strategies like plan formulation and goal setting,

scoring "High" in this coping category. However, despite their strong planning abilities, they seem to lack confidence in their execution, suggesting a potential disconnect between planning and action. This aligns with research highlighting the importance of problem-solving skills for overcoming barriers.

c. The preferred avoidance coping mechanisms for overweight and obese learners seem to be those focused on internal escape - daydreaming, spending time alone, and fantasizing about different realities. These internalized strategies suggest a preference for emotional withdrawal and self-soothing over actively confronting challenges. While this aligns with research associating avoidance with coping with fitness obstacles, it also hints at potential struggles with low self-esteem and a desire for alternative realities, pointing towards interventions that might encourage self-acceptance and engagement with the present as effective alternatives to escapism.

3. Based on the narrative of the participants, the students have their own struggles that they face every day, in terms of their physical and mental well-being. However, there were some cases where in learners will somehow feel motivated to engage with physical activity, especially if money is related. In addition to that, most of the time, because of their workloads and sedentary lifestyle, they are more likely to be inconsistent or just completely stop. Additionally, according to the responses of the participants, it implies that they were highly dependent to their peers because it motivates and support them to engage with physical education, such as going to the gym. In addition, by the comfort they receive from their friends, it makes them feel belong and accept themselves for who they are. It was also mentioned that if there were programs that will make them engage with physical activity, it would be a program, such as sports. It's evident how sports can make a person be physically fit.

In addition, some sports might be more accessible or appealing to obese or overweight learners than others and since sports involve physical activity, they burn calories and might help with weight management, which can encourage learners to engage in physical activities.

Conclusions
1. Obese and overweight learners struggle in terms of physical activity because of their busy schedules, other priorities in life, and insecurities with their physical appearance and body.
2. Obese and overweight learners tend to only lean on emotional support, receiving understanding instead of seeking solutions for their problems and direct advice. Learners like to solve problems in a logical way. Wherein, they formulate a plan and set goals. However, because of the barriers experienced, such as their lack of self-confidence. It hinders the outcome of their plan. Obese and overweight learners tend to lose focus because of daydreaming, wishful thinking, and spending time alone. They tend to isolate themselves and being challenged by their low self-esteem.
3. The finding has concluded that obese and overweight learners experience different barriers, physically and mentally. Most of the time, the students rely on their friends as a way to cope because the support their friends give had a big impact on them, which made them feel included and appreciated. Lastly, the learners have suggested that if there were program like sports, they were more likely to engage with physical activity, knowing that it would help them become more physically fit.

Recommendations
1. It is recommended that obese and overweight learners should gain confidence with their physical appearance and make time for some physical activity.
2. They are recommended to step out of their comfort zone and do something about their worries and problems that will help them feel more confident and be able to do their plans.

3. They are advised to overcome and find ways to cope with the experienced barriers of the obese and overweight learners.
4. The learners are recommended to accept reality and accept things that can be changed with enough effort.
5. Investigate the role of peer support: The study has shown the importance of friends in this context. Future research could focus on understanding the dynamics of these friendships and how they can be leveraged to support obese and overweight learners.
6. Peer Support Programs: Given the positive impact of friends, research could explore the effectiveness of structured peer support programs within schools. These programs could pair overweight or obese students with supportive peers or mentors, fostering a sense of belonging and promoting a healthy body image.
7. Sports Program Design: This study suggests a need for sports programs tailored to obese and overweight learners. Future research could examine different program designs, considering factors like intensity, accessibility, and inclusivity. The impact of these programs on physical fitness, self-esteem, and overall well-being could then be evaluated.
8. Explore mental health aspects: The study has touched upon the mental barriers faced by obese and overweight learners. Future research should delve deeper into these mental health aspects.

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