

# Self-efficacy of participants in a holistic intervention to reduce unemployment and obesity in France and England

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Individuals living with obesity face barriers to reintegrate into the labour market. They often experience psychological distress, low self-motivation, and reduced self-efficacy<sup>(1)</sup>. The maintenance of such negative social-psychological and behavioural factors may exacerbate maladaptive eating behaviours, unhealthy lifestyles, and create a cyclical mechanism of socioeconomic deprivation and high body mass index<sup>(2)</sup>. Self-efficacy, in particular, has been identified in research as a key and common underlying cause of obesity and unemployment as it influences lifestyle behaviour but also re-employment. Although there are interventions exploring the effects of self-efficacy improvement and weight management, limited intervention studies incorporate activities to address self-efficacy as a key determinant of unemployment and obesity. This highlights the need for interventions using a holistic approach to address common modifiable determinants of obesity and unemployment including self-efficacy. The aim of this study was to assess perceived self-efficacy in a sample of individuals living with obesity and/or unemployed.

Data were collected at baseline as part of The Adding to Social capital and individual Potential In disadvantaged Regions (ASPIRE) project which is a novel and innovative, programme developed to improve weight, wellbeing, self-efficacy, and employment in individuals who were living with obesity or unemployed in England and France<sup>(3)</sup>. In addition to demographic variables, data on self-efficacy was collected using a validated self-administered digital version of the General Self-Efficacy Scale (GSE). Differences between groups were analysed using independent t-tests and relationships between variables were explored using correlations (SPSS Version 26).

A total of 223 participants were included in this analysis. The mean age was 37.5 years (SD 17.8), 67.3% (n = 150) were female and 66.4% (n = 148) were participants from France. The mean self-efficacy was 28.6 (SD 6.5), on a scale ranging from 10 to 40 for all participants, with a higher score indicating a higher self-efficacy. Subgroup analysis indicated a statistically significant difference (p = 0.001) in self-efficacy scores between countries. Participants living in France (29.5 ± 6.3) had a higher self-efficacy score compared to participants in the UK (26.8 ± 6.5). There were no statistically significant differences observed for self-efficacy scores between male and female participants (p = 0.835). Additionally, no significant correlations were observed between age and self-efficacy (r = 0.097; p = 0.150).

The findings suggest country-specific differences in self-efficacy and highlight the need for interventions that are tailored to country-specific contexts. Additionally, obesity and unemployment are conditions influenced by a complex interplay of different factors including self-efficacy. Further research is needed to better characterise self-efficacy to inform the development of novel and holistic interventions to address obesity and unemployment.

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## References

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