

Parental Perspectives on Children's Eating Habits and Weight Status

Michelle Martin, Undergraduate Researcher; Delores James, PhD, Faculty Mentor



Department of Health Education and Behavior, College of Health and Human Performance
University of Florida Gainesville, Florida



Introduction

The prevalence of childhood obesity has tripled within the past decades in the United States, with the most noticeable increase among African Americans. Many factors contribute to this epidemic such as high intake of fast foods, overall poor diets, sedentary lifestyles, and parental influence. Parents are responsible for overall food choices and meal preparation. In addition, parents serve as models in establishing eating patterns and physical activity levels. Understanding parents' perception of their children's weight status and their knowledge of the risks of childhood obesity are important before planning any level of family intervention.

Purpose

The goal of this pilot study was to examine parents' perception of their child's eating habits, weight status, and information needed to help the child achieve or maintain a healthy weight.

Methods

Data were collected from a convenient sample of 92 parents and guardians whose children were enrolled at a summer visual and performing arts academy in an inner-city neighborhood in Miami, FL during the summer of 2009. Mothers most commonly completed surveys (n= 68) and children were predominantly Black/ African-American (88%). Children were aged 5 – 14 years old.

The survey instrument was developed based on the research team's literature review and consisted of 45 questions, which addressed demographic information, and the adults' perception of eating habits, exercise habits, and weight status of school-aged children.

Data were analyzed using the Statistical Package for the Social Sciences (SPSS), version 17.0 for Windows (SPSS Inc., Chicago, IL). Frequencies and percentage of non-missing responses were determined for each survey question. Chi square analyses (X²) were done to determine if there were gender differences between some variables and also to determine perceived weight status between certain variables. Significance was established at the p< .05 level.

Results

Parents were asked to choose all that apply from a list of reasons for the high prevalence of overweight and obese children in their community. Overconsumption of fast foods was the second most common answer. See Figure 1.

Parents were asked to choose all that apply from a list of information they would like to help their child achieve or maintain a healthy weight. See Figure 2. Parents who perceived their child to be in the overweight/obese category were significantly more likely to say that a health care provider said the child needed to lose weight (X²=46.04, p<.0001) and were more likely to ask for information on portion control (X²=4.80, p<.05).

Parents said their child's diet could be improved by eating more vegetables (44%) and drinking more water (41%) while eating less junk foods (52%) and sugar (42%). See Figure 3. Parents who perceived their child to be in the overweight/obese category were significantly more likely to say the child needs to eat less junk food (X²=8.1, p<.05).

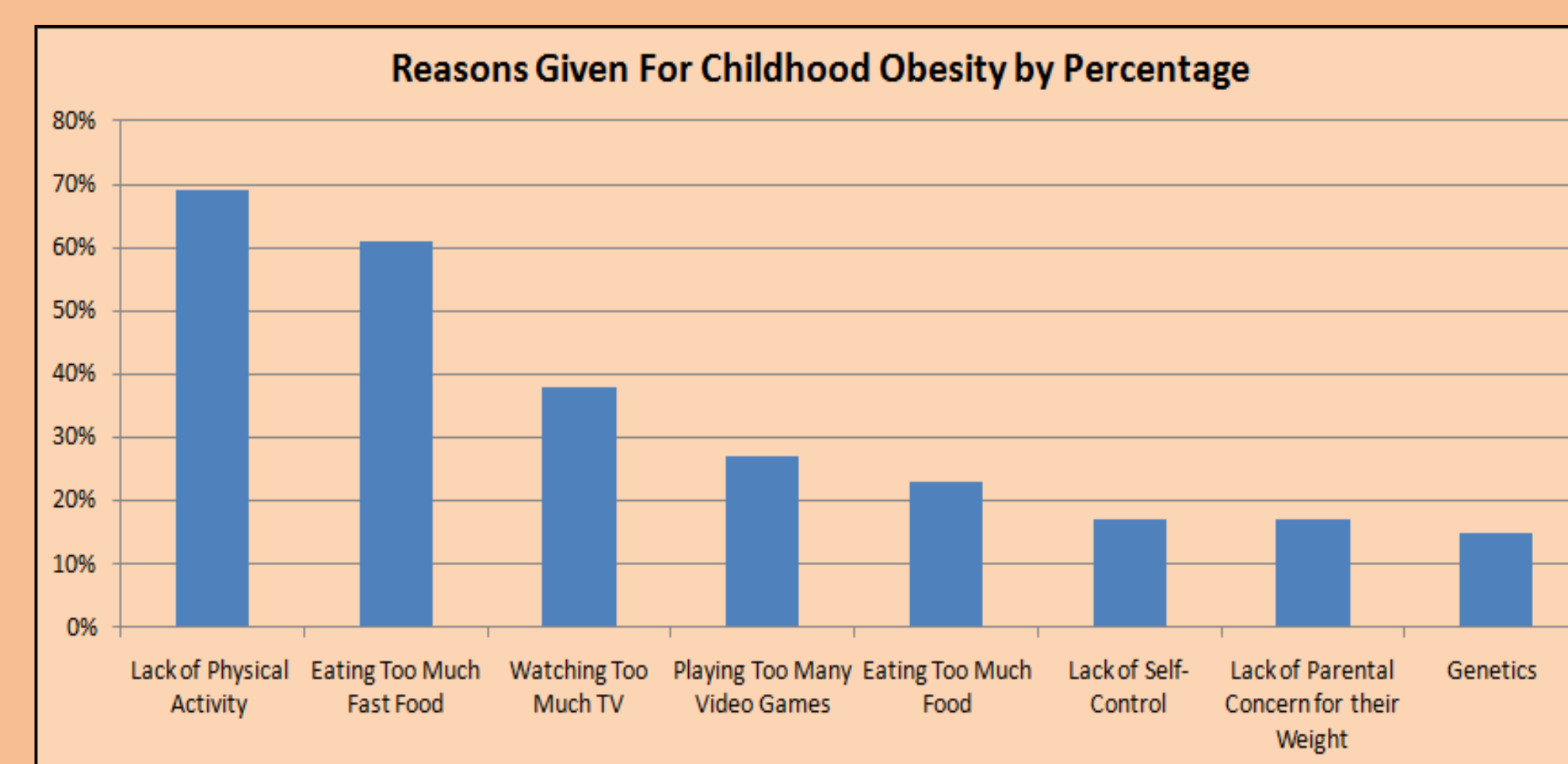


Figure 1. Parents' reasons for childhood obesity in their communities.

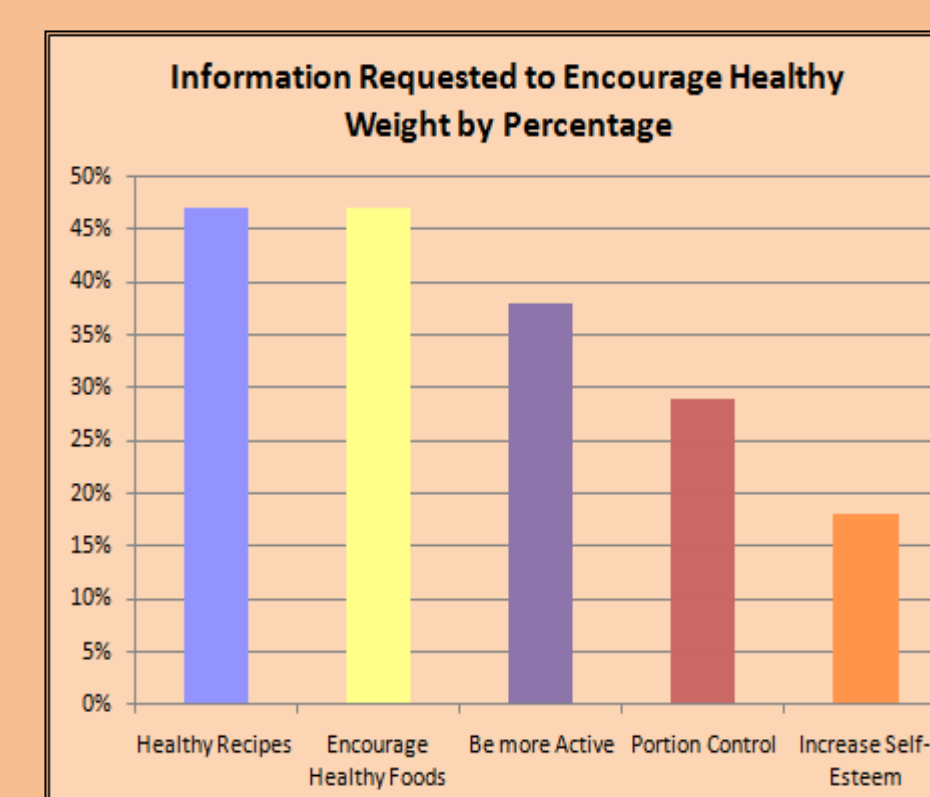


Figure 2. Parents' requests for information to help child achieve or maintain a healthy weight.

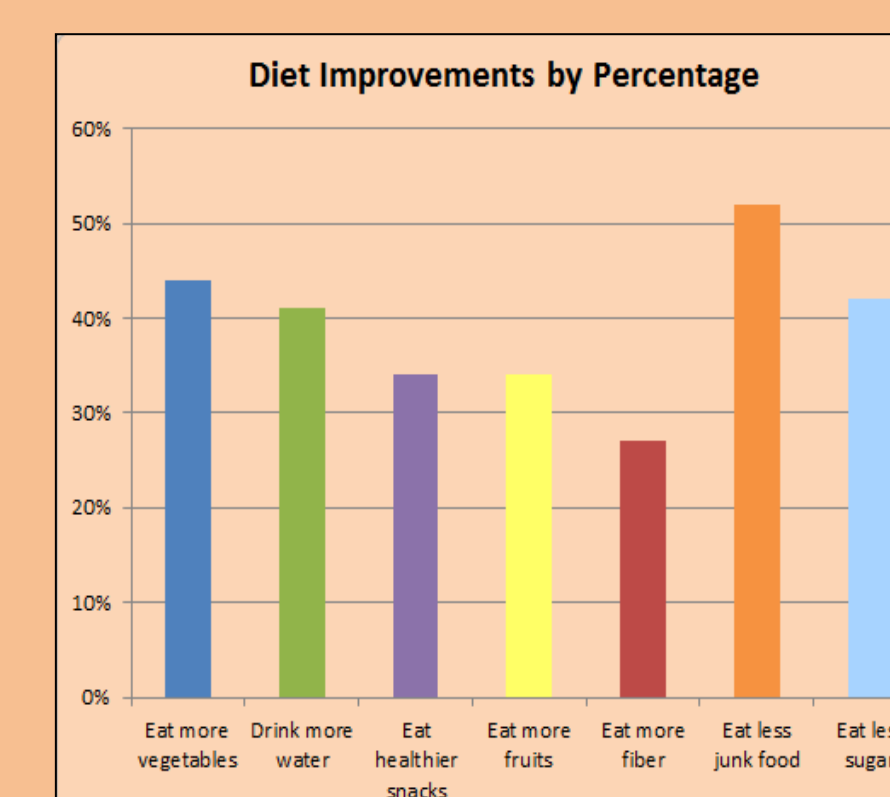


Figure 3. Parents' suggested improvements for child's diet.

Discussion

In this study, many parents attributed childhood obesity to the lack of physical activity (69%) and the overconsumption of fast foods (61%) and parents of overweight/obese children noted the need for reduction in junk food within their child's diet. These dominant views demonstrate parents' awareness of the effects that sedentary lifestyles and poor diets have on a child's weight status. From this we can infer that the increase of childhood obesity may be, in part, due to the lack of support and resources available to parents to efficiently put their awareness into practice towards achieving healthier lifestyles. In fact, many parents in this study (90%) said it would not be difficult for them to change their own eating habits in order to serve as a better role model for the child. If this is true, this suggests that intervention programs involving parents should receive parental cooperation easily.

Conclusions

Findings suggest that African-American parents in this pilot study are conscious of their child's eating habits, be they positive or negative. In addition, these parents are aware of the impacts that fast food consumption and lack of exercise have on children's weight status. There is also an expressed need for help with healthy recipes and encouraging children to like healthy foods. This is particularly important for health care providers and health educators to consider when providing assistance targeted at promoting healthier lifestyles to parents and guardians.

Future research should focus on identifying what parents constitute as a healthy diet for their child. This may prove to be beneficial as it may result in the identification of a significant difference from national standards and guidelines.

Acknowledgements

This pilot study was made possible with the continued guidance from Dr. Delores James as faculty mentor and research advisor, support from the Ronald E. McNair Program at the University of Florida, and the cooperation of the Summer Arts Academy at the African Heritage Cultural Arts Center in Miami, FL. I am forever grateful for each entity's assistance and kindness.