

Child and Parent Factors Associated with Childhood Overweight



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Background & Significance

Trends in Childhood

■ Overweight

- Over a third of children (34%) aged 2-19 years are obese (17.1%) or overweight (16.6%) [Ogden et al, 2006]

■ Physical Activity (PA)

- Only 35.8% of high school students reach the daily recommended level of PA [Eaton et al, 2006]
 - 60 minutes of moderate to vigorous physical activity (MVPA)
- Nearly two thirds (61.5%) of children aged 9-13 do not participate in organized PA [MMWR, 2002]
- Nearly a quarter (22.6%) of children aged 9-13 years do not participate in free-time PA [MMWR, 2002]

Background & Significance

- Trends in Childhood
- Fruit and Vegetable (FV) consumption
 - Only 20% of high school students meet the recommended servings of FV consumption [Eaton et al, 2006]
 - **5 a Day**
 - Less than 15% of elementary children meet the recommended levels of FV consumption [NC SNAC, 2003]
- Sedentary Behavior (SB) or “screen time”
 - Over half (58.3%) of high school students exceed the recommended levels of SB [Eaton et al, 2006]
 - **Less than or equal to 2 hours/day**
 - Girls 12.8 years old spent 45% of their time in SB which increased to 63% by age 14.9 years [Hardy et al, 2007]

Prevalence

- Childhood overweight & obesity is associated with ethnicity/gender/age [Ogden et al, 2006]

NHANES 2003-2004	6-11 yo		12-19 yo	
	Boys	Girls	Boys	Girls
Mexican Americans	47.9%	37.4%	37.3%	31.1%
Non-Hispanic African Americans	34.5%	45.6%	31.4%	42.1%

Background & Significance

Trends in Adulthood

■ Overweight

- About two-thirds (66%) of adults aged 20-74 years are obese (32%) or overweight (34%) [Ogden et al, 2006]

■ PPA

- Only half (49%) of adults meet the recommended levels of PA [CDC, 2005]

- 30 minutes of MVPA on most days

■ FV Consumption

- Only a quarter (23%) of adults meet the recommended servings of fruit and vegetable consumption [CDC, 2002]

- 5 a Day

Parental Influences

- Parental obesity
 - Nearly doubles the risk of adult obesity in children
 - Parents: twice as likely to be obese compared to 30 years ago
 - Parental roles
 - Monitor child's health behaviors
 - Energy consumption
 - Energy expenditure
 - Sedentary behavior
 - Monitor the social and physical environments
 - Home
 - Neighborhood
 - Schools
- (IOM, 2005; Lindsay et al, 2006)

Family-focused interventions

- Enhance effectiveness because obesity runs in families
- Promote parents as role models to reinforce program goals
- Teach parents behavior-change strategies to promote and support health behavior changes in their children

(Epstein, 1996)

Theoretical Models

- Frameworks to support family-focused interventions
 - Social Cognitive Model
 - Reciprocal determinism
 - Personal factors
 - Behavioral skills
 - Environmental factors
 - Stages of Change (TTM)
 - Precontemplation, Contemplation, Preparation, Action, Maintenance, Termination

(Bandura, 1986; Ransdell, 2001; Surgeon General, 2001; Prochaska, 2002)

The Child Health Project

- A health promotion/health education intervention for parents and children who are overweight or obese
 - Information tailored to Parent Stage of Change
 - Information includes:
 - Recommendations for healthy lifestyles
 - Tips for positive parent-child interactions
 - Worksheets to promote behavioral strategies
- Intervention delivered by project staff in primary care clinics
 - PCP referrals
 - Health educators
- Intervention timelines
 - Four intervention and data collection sessions over a year
- Goal
 - Improve parenting capacities to support health behavior changes in their children who are overweight or obese

The Child Health Project

- Parent and Child Measures
 - Demographic & Health Behavior Questionnaires
- Parent Measures
 - Stage of Change Questionnaires (SOC)
 - PA and FV consumption
- Child Measures
 - Pediatric Health Related Quality of Life Questionnaire [PedsQL]
 - Height, weight, body mass index (BMI)

Data Analysis

- Cross Sectional Analysis on Baseline Data
- Purposes
 - Examine associations between parent and child BMI, health behaviors [PA, FV consumption, SB] child health related quality of life (PQL), and parent Stage of Change (SOC)
 - Examine associations between parent and child health behaviors and social and physical environmental factors
- Data Analysis
 - Descriptive statistics
 - Participant characteristics
 - Preliminary analysis
 - Correlations - Spearman's rho
 - Crosstabs - Phi coefficient

Parent Demographics

- Parents/Guardians (n=112)
 - Age (yrs)
 - Mean (SD): 36.5 (12.68)
 - Gender: Female 88.4%
 - Race
 - Black 53%
 - White 13%
 - No response 21%
 - Ethnicity
 - Hispanic 41%
 - Non-Hispanic 49%
 - BMI:
 - Mean (SD) 33.85 (7.69)

Parent Demographics

■ Education

- Some high school 19.0%
- High school graduate 43.0%
- Some college 28.6%

■ Marital status

- Single 75.1%
[Including: divorced, separated, widowed]
- Married 24.1%

Parent Demographics

■ PA

– Participate in regular PA?

■ Yes 49%

■ No 47%

– Participate in recommended levels of PA?

Mean (SD)

■ Typical week 3.80 (2.25)

■ Past 7 days 3.50 (2.40)

■ Nutrition Habits

– FV consumption: 3.41 (2.01)

■ SB

– “Screen time” [hrs/day] 3.78 (1.73)

Parent Stage of Change

Stage of Change (SOC)	Physical Activity (%)	Nutrition (%)
Pre-Contemplation	0.9	3.6
Contemplation	26.8	85.7
Preparation	8.0	5.4
Action	7.1	4.5
Maintenance	57.1	0.9

Child Demographics

- Children (n=112)
 - Age (yrs): Mean (SD): 10.2 (2.16)
Range: 6-13 yrs
 - Gender
 - Girls 46%
 - Boys 55%
 - Race
 - Black 54.5 %
 - White 12.5%
 - No response 21.4%
 - Ethnicity
 - Hispanic 42.9%
 - Non-Hispanic 49.1%
 - BMI:
 - Mean (SD): 27.85 (5.67)
 - Range: 14.87 – 50.16

Child Demographics

- Education
 - Grade 4 15.2%
 - Grade 5 17.9%
 - Grade 6 19.6%
- Overall health
 - At least Good 83.3%
- Do you want to make changes to improve health?
 - Yes 79.5%
- How much do you want to change?
 - Very much/ A lot 61.7%

Child Demographics

■ PA

– Participate in recommended levels of PA?

Mean (SD)

– Typical week

4.48 (2.21)

– Past 7 days

4.52 (2.10)

■ Nutrition Habits

– FV consumption

3.46 (2.11)

■ SB

– “Screen time” [hrs/day]

3.38 (1.69)

Child Demographics

PedsQL Subscales (n=109)	Scores: Mean (SD)
Physical Function	75.89 (18.11)
Emotional Function	69.52 (19.49)
Social Function	76.27 (20.29)
School Function	69.02 (19.92)
PedsQL Total Score	73.10 (14.48)

100 = Never; 75 = Almost Never; 50 = Sometimes; 25 = Often; 0= Almost Always

Environmental Demographics

■ Social (Family) Environment

– Parents participate in PA with children?

■ Yes 47%

■ No 52%

– Food and mealtime (Parent) (Child)

■ Always eat meals together 39.3% 29.5%

■ Dinner at table 70.0% 57.1%

■ Physical (Neighborhood) Environment

– Safe?

■ Yes 63.4%

– Places for PA?

■ Yes 75%

Results & Discussion

Correlation Matrix

Health Behaviors & PQL

Spearman's rho	Child BMI	Parent SB	Parent FV	PQL Soc	PQL Emo	PQL Phys	PQL Scho
Child PA	-0.302 **	-0.027	-0.142	0.050	0.256 **	0.081	0.025
Child SB	0.133	0.293 **	-0.085	0.073	-0.031	0.101	0.073
Child FV	0.037	0.029	0.602 **	0.119	0.004	0.194 *	0.005
Parent BMI	0.049	0.174	-0.081	0.282 **	0.072	0.170	-0.108
Parent PA	0.029	-0.240 *	0.137	-0.012	0.054	0.110	0.106

* = $p < 0.05$; ** = $p < 0.01$

Correlation Matrix

Parent SOC – PA

Spearman's rho	SOC – PA
Child BMI	$r = -0.205, p = 0.034$
Child PA	$r = 0.235, p = 0.015$
Child FV	$r = 0.235, p = 0.013$
Parent PA	$r = 0.251, p = 0.008$
PQL Physical	$r = 0.239, p = 0.013$
PQL School	$r = 0.280, p = 0.003$
PQL Total Score	$r = 0.258, p = 0.007$

Correlation Matrix

Social/Family Environment & Health Behaviors

Spearman's rho	Eating meals together (Parent)	Eating meals together (Child)
Eating meals together (Parent)		r = 0.395 p < 0.001
Parent PA	r = 0.288 p = 0.002	r = 0.147 p = 0.138
Child SB	r = -0.133 p = 0.172	r = -0.232 p = 0.018
Child FV	r = 0.230 p = 0.015	r = 0.056 p = 0.576

Crosstabs

Neighborhood Environment & Health Behaviors

- Neighborhood safety: Health Behaviors
 - No significant findings
- Neighborhood resources for PA: Child SB
 - **phi = 0.503, p = 0.010**
- Play together: Parent FV
 - **phi = 0.424, p = 0.012**
- Play together: Parent PA
 - **phi = 0.412, p = 0.009**

Limitations

- Preliminary cross-sectional data analysis
 - Findings indicate associations ONLY
- All health behavior data are self-report questionnaires and interviews
 - Potential bias in responding
- All children are all overweight or obese
 - Potential bias on health behaviors and health status
- Participants are a homogeneous sample from a specific region and demographic
 - Limits generalizability of findings

Conclusion & Next Steps

■ Conclusions

- Generally, demographic findings agree with research evidence [Trost et al, 2003; Lindsay et al, 2006]
- Findings on SOC, PedsQL and environmental factors emphasize associations between health behaviors and broader constructs (motivation, quality, environment)

■ Next Steps

- Complete study and examine intervention effects
- Consider additional strategies in future intervention studies:
 - Behavioral skill building
 - Behavioral strategies
- Expand on intervention strategies to include more community, environmental and policy components for health promotion

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