

Parental Perceptions of Their Child's Overweight: An Integrative Review of the Literature

Nichole Towns, MSN, RN, CPNP
Jennifer D'Auria, PhD, RN, CPNP

This integrative review described recent published data addressing parental perceptions of their child's overweight. Seventeen studies met the inclusion criteria for the study. Parents of overweight children underestimate their child's weight status or are not concerned about the risks associated with overweight. Child age, gender, and ethnicity may influence parental perceptions of child overweight. Some parents may use criteria other than growth charts to perceive overweight as a problem. Health care providers need to understand parents' perceptions to tailor effective child weight loss interventions. A formalized tool is needed to aid practitioners in identifying parental perceptions of child overweight.

© 2009 Elsevier Inc. All rights reserved.

Key words: Perceptions; Child overweight; Child obesity

CHILDHOOD OBESITY IS a widespread problem. The prevalence of American overweight children and adolescents increased from 15% in 1979 to more than 25% in 1999 (World Health Organization, 2004). The number of children aged 6 to 18 years who qualify for overweight status continues to grow 4% every year (Ogden, Flegal, Carroll, & Johnson, 2002). Increases in obesity have been demonstrated in all age groups, ethnicities, and education levels (Liu, Hironaka, & Pihoker, 2004).

Obesity puts children at greater risk for morbidities such as heart disease, hypertension, diabetes, and cancer (Patrick & Nicklas, 2005). Severely overweight children are more likely to experience psychiatric symptoms and low self-esteem related to their obesity (Levine, Ringham, Kalarchian, Wisniewski, & Marcus, 2001). Environmental factors, lifestyle preferences, and cultural environment appear to have the greatest impact on the rising prevalence of obesity (Hardy, Harrell, & Bell, 2004). A child's family has been shown to be very influential on a child's eating habits, attitudes toward food, and assessment of satiety (Patrick & Nicklas). Parents must be motivated to make changes in their household in regard to child overweight problems and maintain them. If a parent perceives that their child's weight is a problem, they will be more likely to employ changes (Rhee, De Lago, Arscott-Mills, Mehta, & Davis, 2005).

Childhood obesity management issues continue to be a concern and challenge among health care providers (Story et al., 2002). Although there is a great deal of literature describing the positive effects of parental involvement in childhood obesity treatment programs, more recent research has begun to incorporate *parental perception of child overweight* as a key variable in determining the family's readiness to modify the child's environment and lifestyle.

PURPOSE

The findings of this integrative review were based on the findings of a broader study that focused on parental perceptions of their child's weight. The primary purpose of this integrative review was to explore and describe the research literature focused on parental perceptions of their child's overweight.

From the Piedmont Pediatric Clinic, Concord, NC; and The University of North Carolina at Chapel Hill, School of Nursing, Chapel Hill, NC.

Corresponding author: Jennifer D'Auria, PhD, RN, CPNP, Associate Professor, The University of North Carolina at Chapel Hill School of Nursing, CB# 7460, Carrington Hall, Chapel Hill, NC 27599-7460.

E-mail: jdauria@email.unc.edu

0882-5963/\$ - see front matter

© 2009 Elsevier Inc. All rights reserved.

doi:10.1016/j.pedn.2008.02.032

The findings of this review will inform clinicians about the role parental perceptions may play in the prevention and treatment of pediatric overweight.

BACKGROUND

Obesity treatment programs that include the family are among the most successful for pediatric obesity (Epstein, Myers, Raynor, & Saelens, 1998). Programs that encourage parents to accept responsibility for implementing changes into their child's eating and exercise habits allow parents to become positive influences on their children's weight loss (Golan, Weizman, Apter, & Fainarn, 1998; Rhee et al., 2005).

Parents' involvement has been shown to help with long-term results. Epstein, Wing, Koeske, Andrasik, and Ossip (1981) conducted a study that involved targeting parents and children for behavior change. They used three groups—one that contained no target, one that used the child as the target, and one that had both the parent and the child as the target. At the end of the trial and the 2-year follow-up, all groups had similar weight loss changes. However, at the 10-year follow-up, the parent-child target group had considerably better weight changes than the other two groups. Positive long-term results have also been found, using parents as the exclusive agent of change. To follow up on their previous study, Golan and Crow (2004) contacted the participants 7 years later and found that children of the parent-only group had a mean weight reduction of 29% compared with 20.2% in the children-only group.

More recent research in the area of obesity management has begun to focus on the transtheoretical model of behavior change and stages of change to better incorporate the role of parental perception into management of child overweight (Rhee et al., 2005). This model has already been validated in adult studies that examined diet (Greene et al., 1999) and exercise (Sarkin, Johnson, Prochaska, & Prochaska, 2001). It is based on the concept of *readiness to change* and provides a guide to providers for the design, content, implementation, and evaluation of interventions (Sarkin et al.). It identifies five stages that people progress through as they make a behavior change. The stages range from having no interest in changing a behavior (precontemplation stage) to maintaining changes once they are made (maintenance stage). The model provides a sound theoretical perspective for approaching childhood obesity in practice. The first step of this model is to assess the stage of

change as an indicator of the patient's readiness to change. When parents do not realize that their child is overweight, they may be more likely to be in the precontemplation stage and unlikely to acknowledge their child's weight as a problem. If the parent does not view weight as an issue for their child, they may not be as supportive of weight loss treatment efforts.

DEFINITION OF CHILD OVERWEIGHT

For the purposes of this review, parental perception of child overweight was defined as parental recognition of their child's overweight status or concerns about current and future health problems associated with child overweight.

METHODS

This integrative review followed the scientific guidelines for conducting research reviews by Cooper (1998). The purpose of an integrative review is to synthesize and summarize current research evidence. Cooper outlined five stages in the integrative review process: (a) formulation of the problem, (b) literature search, (c) evaluation of data, (d) data analysis and interpretation, and (e) presentation of findings.

The sampling frame for the study was formal published research focused on parental perceptions of children's overweight prior to February 1, 2006. The inclusion criteria were research studies that (a) were published in English, (b) included overweight children in the sample, (c) evaluated parental perceptions of their child's weight, and (d) included measurement of the child's weight or body mass index (BMI) category. Pilot studies were not included. Research studies focused on eating disorders or children with special feeding problems were excluded. Articles were read in full to determine if they met the inclusion criteria of the study. After an exhaustive search, 17 studies met the inclusion criteria.

The following electronic databases were searched for relevant research articles: PubMed, CINAHL, and PsychINFO. Electronic search terms included *childhood obesity*, *overweight*, *weight*, *parent*, *mother*, *father*, and *perception*. They were entered in English in different groupings to facilitate a comprehensive search. The bibliographies of studies meeting the inclusion criteria of the study were also reviewed for pursuing additional studies. Characteristics of each study were collected and entered into the data collection tool for the study.

Download English Version:

<https://daneshyari.com/en/article/2665802>

Download Persian Version:

<https://daneshyari.com/article/2665802>

[Daneshyari.com](https://daneshyari.com)