Modifiable Family Factors Among Treatment-Seeking Families of Children With High Body Mass Index: Report of a Pilot Study

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Conflicts of interest: None to report.

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ABSTRACT

Purpose: The purpose of this pilot study was to explore parenting style and other potential family and social indicators of an obesogenic or weight-promoting family environment. Modifiable factors were sought on which to base a nursing behavioral intervention that could be combined with diet and exercise to reduce youth weight.

Methods: Twenty-eight parents and their 9- to 18-year-old children who were seeking care for overweight responded to in-home surveys to characterize parenting style (warmth/ responsiveness and control). We also examined the extent to which parent modeling of health behavior, child feeding practices, parent knowledge of nutrition, and family social characteristics differed by the control aspect of parenting style. Results: Nearly all youth and parents reported substantial parental love (responsiveness), suggesting little variability in the warmth aspect of parenting style. In contrast, considerable variability was found in the control (moderate versus high) aspect of parenting style. Large effect sizes indicated that mothers with moderate control perceived their lifetime weight to be higher, had more concern about their youth's weight (p = .03), had better knowledge of nutrition, and had a lower body mass index (p = .02) than did mothers with high (firm or restrictive) control. Moderate effect sizes indicated that mothers with moderate control demonstrated better modeling behavior, higher perception of youth weight, practiced less pressure to eat, and had youth with lower body mass index and percent body fat than did mothers with high (firm or restrictive) control. Families who volunteered for the study kept their data gathering appointments, but we recommend a recruitment period of more than 4 months and the inclusion of several referral sites. **Discussion:** Further study of how parent control is related to youth overweight and how appropriate control can be achieved among families with teens who are overweight is recommended. J Pediatr Health Care. (2013) *27*, 254-266.

KEY WORDS

Childhood overweight, family factors, parenting style

We performed a pilot study to identify and understand factors contributing to an obesogenic or weightpromoting family environment among parents and their 9- to 18-year-old children who were seeking care for youth overweight at a Midwestern pediatric clinic. Our goal was to document modifiable factors for potential development of a behavioral intervention that would complement nutrition and exercise therapies to reduce teen weight. In addition to understanding family factors, we sought to characterize the feasibility of recruiting participants and the logistics of working with clinic families on a behavioral intervention. From the literature, we reasoned that an important modifiable family factor was parenting style (Hughes, Power, Orlet Fisher, Mueller, & Nicklas, 2005). We reasoned further that parent modeling behavior (Golan & Weizman, 2001), child feeding practices (Birch & Davison, 2001), parent knowledge of nutrition (Caballero, 2004; Gibson, Wardle, & Watts, 1998), and social factors (Chen & Kennedy, 2004; Delva, O'Malley, & Johnston, 2006) should be examined within the context of parenting style. The framework guiding this study is displayed in Figure 1.

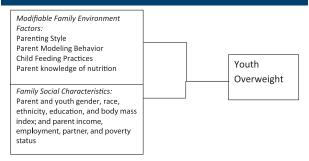
Our methods included survey and focus groups. This article describes the survey findings and answers the following research questions:

- 1. What are the predominant parenting styles among parents seeking clinical treatment for youth overweight?
- 2. To what extent do family environment variables, including parent modeling, youth feeding practices, and knowledge of nutrition differ by parenting style?
- 3. To what extent do family social characteristics (including parent and youth gender, body mass index [BMI], body composition, race, and ethnicity) and parent education, income, occupation, and partner status differ by parenting style?
- 4. How feasible is recruiting clinic families for study and what logistics contribute to their participation in the study?

BACKGROUND AND LITERATURE REVIEW

Youth overweight and obesity, referred to as high BMI in this article (Ogden, Carroll, Curtin, Lamb, & Flegal, 2010), presents a serious challenge to the health of the population. The consequences of high BMI for

FIGURE 1. Conceptual framework of family environment and youth overweight.



youth are compelling physically, emotionally, and socially. Heritability of BMI is substantial, but the dramatic increase in high BMI prevalence among youth highlights the importance of environment (Wardle, Carnell, Haworth, & Plomin, 2008). Because youth are socialized and develop lifelong behaviors within the family, high BMI is a family health issue.

One factor in the family environment is parenting style—a constellation of attitudes toward the youth that create an emotional climate in which the adults' behaviors are expressed. These behaviors include parenting practices—that is, the specific goal-directed activities adults perform to carry out their duties and non–goal-directed activities, such as gestures, tone of voice, and spontaneous emotional expression (Darling & Steinberg, 1993). Baumrind (1968) created the seminal conceptualization of parenting style. Forty years of research has produced a remarkably consistent picture that responsive (warm) and demanding

(control) parenting exemplified by encouragement of pro-social behavior, setting limits, monitoring, problem solving, and positive involvement is conducive to the successful socialization of children. Researchers have demonstrated that parents who combine clear

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expectations of youth accountability with warmth and support have more success in curbing risk behavior than overly strict or indulgent parents (Baumrind, 2005). Parenting style in families with high BMI youth is gaining attention (Kitzman & Beech, 2006).

Another factor associated with high BMI among youth is parent modeling behavior. Modeling includes portion sizes and frequency and timing of meals and snacks (Birch & Davison, 2001; Robinson, Kiernan, Matheson, & Haydel, 2001). Parents matter, and their behavior significantly influences youth behavior even

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