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How Parenting Behaviors Influence Weight and Health Status of African American Adolescents

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How Parenting Behaviors Influence Weight and Health Status of African American Adolescents Natasha Hourel, PhD

Abstract

This quantitative secondary data analysis sought to investigate the relationship between parenting styles and practices of African American mothers and fathers residing both inside and outside of the home on the weight status (as measured by BMI percentile) of their adolescent children. Findings indicate variables beyond parenting practices, such as urban/rural residence, must be considered to explain weight status among adolescents.

Problem

The prevalence of obesity is significantly higher among minority children compared to other groups (CDC, 2011). 42% of African American children between the ages of 6 and 19 years are overweight or obese compared to 33.2% of all children in the United States (National Institutes of Health, 2012).

While parenting characteristics (styles and practices) have been studied within many frameworks, much of the childhood obesity research in relation to parenting style has focused predominately on European children from two-parent middle-class households or economically disadvantaged African American children from single mother households (Baumrind, 1972; Bluestone & Tamis-LeMonda, 1999; Darling & Steinberg, 1993; Domenech, Donovick, & Crowley, 2009; Querido et al., 2002).

What continues to be missing from the literature is a specific discussion about the differences in parenting styles and practices between African American mothers and fathers (residing both inside and outside of the home), variations among family SES, educational backgrounds, parent-adolescent gender differences, and adolescents' reports on parenting styles in relation to weight status (as measured by BMI percentile; Berge et al., 2010a).

Purpose

The purpose of this quantitative study was to investigate the relationship between parenting styles and parenting practices of African American mothers and fathers residing both inside and outside of the home on the weight status (as measured by BMI percentile) of their adolescent children.

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Relevant Literature

Background

•	Childhood obesity has tripled in the United States
	over the last 30 years. Forty percent of all youth in
	the African American population are considered
	overweight, with the highest prevalence among
	African American adolescent girls 12 to 19 years.

 Obesity during childhood and adolescence is often an indicator of obesity problems in adulthood, which are characteristically more dangerous (CDC, 2012). In the United States, adult obesity is responsible for an estimated 112,000 deaths per year (Courtemanche & Carden, 2011; Flegal, Graubard, Williamson, & Gail, 2005).

Framework

- Social cognitive theory was used to look at parental involvement/behaviors that contributed to adolescent weight status (as measured by BMI percentile).
- The theory emphasizes the importance of observational learning to children's development and explores the continuous reciprocal interactions between the individual's cognition, their environments, and the psychosocial determinants, such as those affecting weight status.

Research Questions

RQ1. Do parents' perceived parenting styles (authoritative, authoritarian, permissive, and uninvolved) influence the BMI percentile of African American adolescents from 12 to 17 years of age?

RQ2. Do parents' perceived parenting practices (demandingness and responsiveness) influence the BMI percentile of African American adolescents from 12 to 17 years of age?

RQ3. Is the relationship between parenting practices and BMI percentile influenced by sociodemographic variables (family structure, parents' education, parents' BMI, household income, parent and adolescent gender pairs and area of residence--urban/rural)?

Shirley Gerrior, Committee Chair, Aimee Ferraro, Committee Member, Kimberly Brownley, URR Member

Procedures

Secondary analysis of archival data (NLSY97):

The sample consisted of African American adolescents and their parents. Of adolescents (n = 325), with girls making up 51% (n = 165) of the sample and boys making up 49% (*n* = 160).

Data Analysis

The data analysis included descriptive statistics, a Kruskal-Wallis test, and hierarchical multiple regression. Relative weights were applied while analyzing demographic characteristics of the sample.

Findings

RQ1

- The parenting style types among the African American parents were 48% Authoritative (mothers), 42% Authoritative (residential fathers), and 33% Uninvolved (nonresidential fathers)
- In African American families, authoritative parenting (by both mother and father) produced the lowest BMI percentiles among adolescents, while authoritarian parenting produced the highest BMI percentiles.

RQ2

- African American parents (mothers and fathers) reported moderate to high levels of parental supportiveness (warmth) and high levels of behavioral control (strictness or limit-setting). Unsupportive and permissive styles (e.g., parents reluctant to enforce rules) were low.

RQ3

- Residence was the only sociodemographic variable found to have statistical significance
- Single mother households represented the largest of the family structure groups observed in this study
- Living with both parents did not have a significant impact on adolescents BMI percentiles and household income and parental education showed weak associations. These results contradict previous research.

This study was limited by the data available from the NLSY97 for Wave 1 concerning measures of parenting, along with parent and adolescent selfreported height and weight measurements.

Although parenting characteristics did not significantly influence adolescent weight status, BMI percentile were highest among adolescents with authoritarian parenting styles, while BMI percentile were lowest among adolescents with authoritative parenting styles. In other words, some discipline but not too much works best.

The relationship between the rural/urban residence of individual adolescents and BMI percentile was identified as a potential factor for consideration when identifying locations that are at a high risk of overweight and obesity and the planning and promotion of intervention to promote healthy lifestyles.

The high prevalence of overweight and obesity in children, with significantly higher rates among African American girls, still exists and calls for further analysis.

Family based intervention may be important in treating obesity in African American children because of the family's ability to shape the child's behaviors.

Obesity remains a global health problem, which is of more concern among children.

Largely, this study increases knowledge on African American parenting characteristics and promotes education and social awareness of the continued obesity epidemic that plagues African American children in the United States.

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Limitations

Conclusions

Social Change Implications