Parental Perception of Healthy Eating and Physical Activity: Results from a Preliminary Photovoice Study

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Parental Perception of Healthy Eating and Physical Activity: A Photovoice Study

SUMMARY BOX

What does this paper contribute to the wider global community?

- Community-based participatory research, using the Photovoice data collection method can be a powerful device for parents to share their stories about their family’s assets and barriers to healthy eating and physical activity
- Exploring parents’ perception of family assets and barriers to healthy eating and physical activity using Photovoice is the first step in the design of interventions that can be tailored to a family’s unique sociocultural needs

Keywords: childhood obesity, community-based participatory research, parents, nutrition, physical activity
AIM

The aim of this study was to explore parental perception of assets and barriers of healthy eating and physical activity among a group of diverse, economically-disadvantaged mothers in the southeastern United States. A community-based participatory research method (CBPR) was used.

BACKGROUND

The World Health Organization (2012) estimated that 170 million children in developed and developing countries are overweight or obese. In the United States (U.S.), where this study was conducted, addressing childhood obesity is crucial, as the prevalence rate of obesity among U.S. children has tripled to 16.9% since 1980 (Ogden et al. 2010). Higher prevalence rates of childhood obesity in the U.S. have been reported among African American and Hispanic/Latino children (Ogden et al. 2010), and children living in poverty (Bethell et al. 2010).

Successful interventions that enable families to maintain a healthy weight require a foundation that integrates family, social, cultural, and environmental factors. The development of family weight management interventions to address childhood obesity requires a ground-up approach that starts with understanding parental perception of family sociocultural and environmental factors that have an impact on child weight. Exploring parents’ perception of family assets and barriers to healthy eating and physical activity is the first step in the design of interventions that can be tailored to a family’s unique sociocultural needs.

DESIGN

A CBPR approach, employing the Photovoice data collection method was used to explore parental perception of assets and barriers to healthy eating and physical activity.
METHODS

Approval to conduct the study was obtained through the university institutional review board. Data were collected from 2011-2013 at a nurse-run community health clinic in the southeastern U.S. that served an ethnically diverse, and economically-disadvantaged population. A purposive sample of 10 mothers of children aged 2-19 years was recruited for the study.

The Photovoice data collection method enables individuals to reflect and communicate their everyday life experiences through the use of images captured with a camera (Wang 1999). The three primary goals of the Photovoice method are to produce images, receive and attach meaning to the images, and contextualize the content of the images (Wang). The following steps of the Photovoice method were used in the study: 1) engagement of the administration and staff at the nurse-run community clinic; 2) recruitment of participants; 3) an initial session, either in a focus group format or one-on-one with the principal investigator, to introduce participants to the Photovoice method and to pose themes for the photography assignment; 4) participants were given disposable cameras and took photos; 5) the participants returned the cameras and the cameras were sent for processing (photos were printed on photo paper and backed up on a disc); 6) participants were invited to a second focus group or individual interview (based on participant’s availability) to share stories about the photos with the following script: a) What do you See here?; b) What is really Happening here?; c) How does this relate to Our lives?; d) Why does this situation, concern, or strength exist?; and e) What can we Do about it? (Wang).

Data were analyzed according to the procedural steps outlined by Diekelmann, Allen, and Tanner (1989). Common themes and sub-themes were identified during the content analysis. Participant quotes about the photographs were included to highlight each theme.
RESULTS

The participants \((n = 10)\) were all female, and ranged in age from 23 to 47 years, with a median age of 37.5 years. A majority \((90\%, n = 9)\) identified themselves as Hispanic/Latina and one participant identified herself as African American. Sixty percent were either employed or worked at home, and 90% reported a family income less than $75,000 per year. More than three quarters \((80\%, n = 8)\) were married, and the number of children in the households ranged from one to four.

Four major themes and eight sub-themes were identified (Table 1). The participants reported parental role-modeling of healthy eating and accessibility to healthy foods as assets to healthy eating. By contrast, the participants shared that access to unhealthy foods and cultural food choices were barriers to healthy eating. The participants identified parental role-modeling as an asset to physical activity, and the influence of technology and lack of safe places as major barriers to physical activity.

CONCLUSIONS

The conclusion of this preliminary study is that parental role-modeling is a major asset of children’s healthy eating and physical activity behaviors. Accessibility to foods can be an asset (e.g., keeping healthy foods within children’s reach) or a barrier (e.g., convenience of fast foods). For these families, technology, including handheld devices, often replaced or took priority over physical activity. Finally, the lack of safe or adequate spaces (e.g., busy roads) around the home was perceived to be a barrier to physical activity.

The assets and barriers of healthy eating and physical activity identified by the mothers represent the perception of a small sample of participants in a southeastern U.S. state. This study was the first step in designing a family-based weight management intervention that can be
Photovoice tailored to a family’s unique sociocultural needs. Future research with larger samples of parents is warranted. Further examination of the influence of family economics on lifestyle behaviors and methods to integrate cultural food practices into a healthy diet is needed. Lastly, future research can incorporate the findings of this study into intervention design with subsequent testing with larger, diverse samples.

**RELEVANCE TO CLINICAL PRACTICE**

Photographs can be powerful devices for parents to share their stories about their family’s assets and barriers to healthy eating and physical activity. CBPR, using the Photovoice method, can be first step in the intervention development process. Understanding parental perception of sociocultural factors provides the foundation for the development of interventions that can be tailored directly to a family’s unique needs.
REFERENCES


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