

Greater parental stress linked to children's obesity, fast food use and reduced physical activity

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Parents with a higher number of stressors in their lives are more likely to have obese children, according to a new study by pediatric researchers. Furthermore, when parents perceive themselves to be stressed, their children eat fast food more often, compared to children whose parents feel less stressed.

"Stress in parents may be an important risk factor for [child obesity](#) and related behaviors," said Elizabeth Prout-Parks, M.D., a physician nutrition specialist at The Children's Hospital of Philadelphia, who led a study published online today in the November issue of *Pediatrics*. "The severity and number of stressors are important."

Among the parental stressors associated with childhood obesity are poor physical and mental health, financial strain, and leading a single-parent household, said Prout-Parks. Although previous researchers had found a connection between [parental stress](#) and child obesity, the current study covered a more diverse population, both ethnically and socioeconomically, than did previous studies.

The study team suggested that interventions aimed at reducing parental stress and teaching coping skills may assist [public health campaigns](#) in addressing childhood obesity.

The researchers analyzed self-reported data from 2,119 parents and

caregivers who participated in telephone surveys in the 2006 Southeastern Pennsylvania Household Health Survey/Community [Health Database](#), conducted in Philadelphia and neighboring suburbs. The households contained children aged 3 to 17, among whom 25 percent were obese. Among the variables included were parental stressors, parent-perceived stress, age, race, health quality and gender of children, adult levels of education, BMI, gender, sleep quality, and outcomes such as child obesity, fast-food consumption, fruit and [vegetable consumption](#), and physical activity.

Of the measured stressors, single-parent households had the strongest relationship with child obesity, while [financial stress](#) had the strongest relationship for a child not being physically active. Unexpectedly, neither parent stressors nor parent-perceived stress was associated with decreased fruit and vegetable consumption by their children.

However, this study was the first to find an association between parent-perceived stress and more frequent fast-[food consumption](#) by children. Fast food, often containing high quantities of fat and sugar, is an important risk factor for obesity and child health. The researchers speculated that parents experiencing stress may buy more fast food for the family, to save time or reduce the demands of meal preparation. The authors also suggest that actual and perceived parental stress may result in less supervision of children, who may then make unhealthy food and activity choices.

"Although multiple stressors can elicit a 'stressor pile-up,' causing adverse physical health in children, parent's perception of their general stress level may be more important than the actual stressors," the authors write.

Future research on child obesity should further examine other family behaviors and community factors not available in the current study,

conclude the authors. In addition, "Clinical care, research and other programs might reduce levels of [childhood obesity](#) by developing supportive measures to reduce stressors on parents," said Prout-Parks. "Teaching alternative coping strategies to parents might also help them to reduce their perceived stress."

More information: "Influence of Stress in Parents on Child Obesity and Related Behaviors," *Pediatrics*, published online Oct. 22, 2012, and in print, Nov. 2012. www.pediatrics.org/cgi/doi/10.1542/peds.20120895

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