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EXPLORING CHILD OBESITY AMONG AFRICAN AMERICANS
THROUGH THE EYES OF PARENTS

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
TyYendra VyOnn Moore
December 2009


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December 2009

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ABSTRACT

The purpose of this study was to explore African American parents' knowledge about child obesity and the various external factors they perceive contribute to their own child's weight problems. The post positivist paradigm was utilized for this study. The researcher conducted ten interviews at a school in San Bernardino, California with Eight female and two male African American parents who ranged in age from 30 to 52-years-old. The researcher theorized that child obesity was greatly increased by commercials, advertisements, and the lack of school activities. The results indicated parents did not identify these as major contributors to their child's obesity. The study showed that parents held themselves responsible for their child's weight problems and felt guilty for allowing the weight problems to get out of control. It was concluded that the children's weight problems were notably related to poor eating habits, some which were culturally linked, and the lack of physical activity. This research could be used on a micro and macro level to educate individuals and implement health programs for children.

ACKNOWLEDGMENTS

First and foremost I would love to give the ultimate praise to God, for inspiring me to be a better person and guiding me through the process of achieving my goals. I would like to thank my family and friends who have supported me through this challenging, yet humble experience. Due to your prayers and motivation, I have been given the strength to complete the Masters program and become an excellent social worker. I would also like to give a special thanks to the whole MSW faculty. Everyone was so nice and truly dedicated to making sure our cohort succeeded in the program. I really enjoyed myself and have learned an abundance of information that I can now share with the world, so thank you for allowing me the opportunity to be apart of such a wonderful and educating program, whose mission is to promote good, quality, educated social workers. To my wonderful cohort, we have become a family of these past few years, I felt the love, support, and bonded we had from the very beginning. Congratulations to you all, we are going to make wonderful leaders. And last but not least I would like to acknowledge myself for staying grounded and focused when situations tried to get you down. I am very proud of my

accomplishments and so appreciative of my hard work and
dedication to completing the program. I am a true believer
that dreams do come true.

God Bless Us All
TyYendra Moore

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CHAPTER ONE

ASSESSMENT

Introduction

In this chapter the post positivist paradigm is introduced, which best compliments this particular study of African American parents' perception of child obesity. A rationale is provided showing why the paradigm is appropriate for this unique study. The chapter also includes a summation of literature was reviewed on the awareness of obesity and different factors that contribute to child obesity. Several points of views will be discussed to give a broad idea of the literature on different perspectives. Some literature will suggest that child obesity among African American children is related to television advertisements, lack of affordable healthy food products, poor eating habits, television marketing and lack of physical activity. Also covered are possible questions that may arise during the course of the data collection. Overall, a better understanding of the importance of this topic will be provided. Optimistically, this study adds knowledge to the social work profession. The research focus is to assess how much

information African Americans parents know about child obesity.

Research Focus and/or Questions

For several years the child obesity rate has drastically increased. This speed has doubled for preschool children between the ages of two to five years old. This rate has also tripled for children ages six to eleven over the past 30 years (Institute of Medicine, 2004). Approximately nine million American children over the age of six are being diagnosed as obese (Institute of Medicine, 2004). Child obesity is defined as children or youth between the ages of 2 and 17 years of age, who have body mass indexes (BMI) equal to or greater than the 95 percentile of the age-and-gender specific BMI charts created by the Centers of Disease Control and Prevention (Institute of Medicine, 2004). Child obesity is more prevalent among the minority population, particularly African Americans. Among African American children ages six to eleven, 17% of boys are overweight, as are 22.8 % of the girls (Institute of Medicine, 2004). There is a need to investigate the reason behind so many African American children are becoming overweight/obese and

experiencing various psychological and physical problems. Further research has also discovered that several children are developing a variety of medical conditions, in particular type II diabetes. As a result of the increased body fat, lack of physical activity, and bad food intake, these lifestyles are causing children to develop diabetes (Goran, Geoff, Ball, & Cruz, 2003). Hopefully the findings provide parents with an understanding of certain factors that may contribute to a child becoming obese. With any luck providing this data will enlighten parents of various internal and external factors that may contribute to the increase of overweight or obese African American children.

This proposal will explore various dynamics of child obesity and more importantly the parents' perspectives and insight into the life of raising a child who is obese or overweight. To assist with data gathering the researcher covered a list of questions that were addressed in the interview by the participants; What do you know about child obesity? Are you aware of what your child eats on a daily basis? What type of snacks does your child consume? Do cultural norms play a significant role in your child's weight? Is your child involved in

any extra curricular activities? Does he/she watch a lot of TV? How do you feel about your child's weight? What type of environment does your family live in? What does your child think about body images that are shown on television? With some of these questions answered one will have an idea of parents' knowledge of their child's health and weight problems.

Paradigm

Rationale for Paradigm

The reason the post positivist paradigm was chosen was to build a better understanding of why child obesity is increasing. This paradigm is focused more on language, which allows one to ask open-ended questions and be fully engaged in the interview. It allows one-on-one involvement as well as a personal connection between the researcher and the participants. This is qualitative research, which is the most appropriate method for the study. Qualitative research allows participants to be compassionate about their feelings and also build a rapport with the researcher which gives one the opportunity to express oneself. The researcher can ask open-ended questions, which allows the participants to

truly reflect and provide the researcher with meaningful data.

Ultimately the study seeks to understand child obesity from an African American parents' perspective. Through this discussion, there should be a better understanding about cultural norms and possible interventions that may assist with the African American culture

Literature Review

In this section various studies on child obesity statistics, causes of child obesity and other issues that relate to this epidemic will be discussed. Specifically, several factors such as social problems, environmental factors and socio-economic status are examined. The literature will also touch upon advertisement and marketing to low income families. This section will also focus on culture and the dynamics of African American families that may related to child obesity.

Child Obesity Statistics

Literature explains that a child being overweight can quickly lead to obesity if the problem is not addressed in the appropriate manner. Strauss and Pollack

(2001) focused on the recent changes in overweight children within a national sample. The national Longitudinal Survey of youth conducted from 1986 to 1998, sampled 8,270 children, ages ranging from four to twelve years old. The goal was to observe how much the child obesity rate had increased over a ten-year span. Strauss and Pollack measured the overweight children by body mass index (BMI). They also included race/ethnicity, income and residency as a factor to consider in the study. The results showed that between 1986 and 1998 the percentage of overweight children increased drastically among ethnic groups. By 1998 the African Americans population increased by 21.8% over a twelve year span. The Hispanics weight increased by 21.5 and the Caucasians increased by 12.3%. This meant that 21.8% of the African American children were overweight (Strauss & Pollack, 2001). In another study, literature focused on boy and girl gender differences related to child obesity. It was noted that among African American children there was a higher prevalence of overweight girls and adolescents than other ethnic groups (Ogden, Carroll, Curtin, McDowell, Tabak, & Flegal, 2006).

Television versus Physical Activity

Miller, Rosenbloom, and Silverstein (2004), explain that over the past few decades there appears to be a prevalent life style change that has occurred in the world, which has resulted in a decrease in children's physical activity and a rapid increase in caloric intake. They noted that in the present day, families use automobiles and other means of transportation, including equipment such as elevators and escalators, rather than walking or climbing stairs to get to their destination. In addition, the amount of time spent playing outside has decreased. They theorize that these lifestyle changes have raised the child obesity rate (Miller, Rosenbloom, & Silverstein, 2004). More children are watching television, playing video games, and spending hours on the computer, versus being involved in physical activities outside the house (Miller, Rosenbloom ,& Silverstein, 2004).

Anderson, Crespo, and Barlet, (1998) also conducted a study regarding physical activities among these children. Their research study focused on assessing children to see how much television is being watched compared to actual physical activity on a daily basis.

The researcher's involved 4063 children aged 8 through 16-years-old. Ethnically speaking, Caucasian, Hispanic and Black children were sampled. These assessments were conducted in the students' home and simple questions were asked about how often the children played outside and watched television.

Overall when analyzing children between the ages of 8 to 16-years-old, the study also showed that overall, African American boys reported being engaged in vigorous physical activity at least three or more times a week by 78%. The girls' results showed 69% of them reported to being involved in exerting physical activity three or more times per week. Although the results suggest that the children were receiving adequate exercise, their body weight suggested otherwise (Anderson, Crespo, & Barlet, 1998). African American children had the highest rate of watching more than 4 hours of television each day and they also have greater body fat. These findings seem to stress the lack of physical activity. Since children have shown they get little exercise, it seems apparent that children would gain weight (Anderson, Crespo, & Barlet, 1998).

It is evident that children are not receiving enough exercise. Physical activity decreases the risk of children becoming obese by 23% to 43% and watching television and playing video games increases a child's risk of becoming overweight by 17% to 44% and becoming obese 10% to 61% (Anderson, Crespo, & Barlet, 1998). Once again, in this new century, physical activities, such as playing outside with friends, riding bikes, or getting involved with sport activities have been replaced with television, computers, and video games.

On average, African American children between the ages of eight to seventeen were estimated to spend 48% more time watching television than other ethnic groups (Powell, Szczypka, & Chaloupka, 2007). African American teens aged twelve to seventeen watched on average 40% more television during prime time hours and an estimated 95% more television during daytime which is Monday-Friday, 10-4:30pm (Powell, Szczypka, & Chaloupka, 2007). There were a couple of findings to suggest that behaviors related to diet and physical activity is established early in the child's life, which seem to be modeled by family members (Powell, Szczypka, & Chaloupka, 2007). There were low percentages of parents providing

role-modeling skills. Most of the children mimicked their parents dieting behaviors. If the parents were not physically active then the odds of the children growing up and engaging in exercise regimens or eating healthy, were very slim.

Advertisement and Marketing

In the literature, researchers keyed in on another common aspect that may influence weight gain in African America children, which is advertisement. Some studies focused on the different food advertisements that were being displayed differently in different neighborhoods. It was reported that there is a lack of healthy food choices in poor neighborhoods, which makes it slightly difficult for residents to eat healthful foods away from home. Advertisements seem to stress more unhealthy products to purchase versus fresh fruits and vegetables (Barlovic & Jansen, 2006).

One study stated that governments need to regulate food marketing to decrease the likelihood of obesity, because the media is so prevalent they have the ability to display and market unhealthy foods, such as, sweets, chocolate, fried foods, desserts containing a great deal of sugar (Barlovic & Jansen, 2006). Since children are

easily influenced, it is difficult for them to understand the marketing business and how it is not always beneficial to acquire the foods you see on television (Barlovic & Jansen, 2006).

A recent study focused on the different advertisements that were aired on predominately African American television stations during after school programming. Their findings showed a significant increase in the amount of food and beverage commercials that were shown on Black Entertainment Television (BET) compared to Warner Brothers (WB) and the Disney Channel (Powell, Szczypka, & Chaloupka, 2007). There were more commercials for Burger King, McDonalds, and various sweets and candy that were advertised for grocery stores.

Researchers believe that fast food marketing is affecting child obesity. Fast food is highly marketed to children, by using happy music, fun toys, and social icons. Studies have shown that being exposed to just 30 seconds of commercials influences children's food preferences. It is reported that once a child is 3-years-old, they quickly become targets of advertising unhealthy foods (Schwartz & Puhl, 2003). It is estimated that children are exposed to over 10,000 food

advertisements per year. Of these advertisements 95% of them are geared towards fast food, drinks, candy, and sugared cereal (Schwartz & Puhl, 2003). The researchers state that in 1997 "nearly seven times as much money was spent advertising confectionery and snacks (i.e. candy, gum, mints, cookies, crackers, nuts, chips, and other salty snacks) than was spent advertising fruits, vegetables, grains and beans" (Schwartz & Puhl, 2003).

Studies show that middle and higher income neighborhoods have two to four times as many supermarkets than the low-income neighborhoods. Another study focused on how food was marketed differently in the rich and poor neighborhoods; it was reported that the food environment in poor neighborhoods make it difficult for residents to eat healthy foods away from home (Institute of Medicine, 2005). Researchers have recognized that minorities with low income have poor access to supermarkets. In these neighborhoods most African Americans mainly have access to Liquor stores and small corner markets (e.g., Smoyer-Tomic, Spence, Raine, Amrhein, Cameron, Yassenovskiy, Cutumisu, Hemphill, & Healy, 2007).

Socio-economic status is another reoccurring theme which relates to child obesity among African American

children. It highlights that obesity is notably related to socio-demographic factors such as low income. Low socio-economic status contributes to poor dietary quality. Drewnowski and Darmon acknowledge that "financial disparities limit the access to healthier foods, which are costlier, and therefore maybe the main contributor to the prevalence of the higher rates of obesity and diabetes among minorities and low socio-economic status" (Drewnowski & Darmon, 2005, p. 270). It is stressed that improving access to healthier foods is vital to declining childhood obesity in the United States.

School Systems

Outside of the home, children and adolescents spend most of their time in school, therefore with would be beneficial to provide an environment that with consistent physical activities and the promotion of healthy nutrition. Physical education in the school systems is essential to partially sustaining good health. Some physical education classes in elementary schools have been reduced, which takes away from students getting exercise. Some authors suggest there is a lack of public funding for quality physical education and sport

facilities (Lobstein, Baur, & Uauy, 2004). That adjustment appears to affect the quality of physical activities the students are supposed to be engaged in. In addition, researchers are also looking into the types of snacks that are being distributed for purchase. There seems to be a need for dietary standards for the school lunch programs. Countless school systems are equipped with vending machines which children have access to sweets, chips and sodas. Since teachers are unable to monitor the students' intake, the students will often indulge in these snacks, which will cause weight gain (Lobstein, Baur, & Uauy, 2004).

Culture

One aspect that researchers suggest is prevalent in childhood obesity among African American children is ones culture or cultural norms. The family environment is very important in contributing to children's weight gain. Children's diets are very similar to what the family eats (Odoms-Young & Fitzgibbon, 2008). Airhihenbuwa and Kumanyika conducted an interview study in Pennsylvania and discovered the cultural factors related to food intake influence a child's eating patterns. It was discussed that among the African American culture, eating

"soul food" is highly symbolic to their culture (Airhihenbuwa & Kumanyika 1996). Soul food can be defined as Southern cooking traditionally eaten by African American, which represents family, quality time, and rejoicing with loved ones. Some families don't acknowledge child obesity relating to ones culture. Furthermore, there are some parents who do not view their child as being obese. Among some African Americans, larger body types are culturally accepted. African Americans are known for having meat on my bones, such as hips, big thighs and a well rounded butt. If some parents misperceive their child's weight based on cultural norms, negative attitudes about body size and being overweight may not be communicated to the child (e.g., Young-Hyman, Herman, Scott, & Schlundt, 2003).

Botta (2000) sampled 15-year-old African American and Caucasian females. Various questions were asked such as, their perception of the types of shows they watched and their exposure to "thin television dramas" related to Beverly Hills 90210 or Melrose Place. The participants were asked to rate certain body images to see if they were perfect ideal bodies. After the study the results showed that African American girls were less dissatisfied with

their body images than Caucasian girls (Botta, 2000). In general, Researchers suggest more studies need to be conducted to address cultural differences with regards to ideal body images from the parent and child's perspective (Johnson, Pilkington, Deeb, Jeffers, Jianghua, & Lamp, 2007). With regards to body images, there was a variety of literature on African American females, however very few, if no literature on males regarding body images.

Theoretical Orientation

In reading about child obesity among African Americans, researchers focused on health related issues pertaining to children becoming over weight. There seems to be a rise in medical conditions, such as Type II diabetes and high blood pressure (Goran, Ball, & Cruz, 2003). In addition, cultural norms and one's social environment also contributed to childhood obesity. With these findings it seems appropriate to apply the Biopsychosocial Theory to this study (Turner, 1996). This model is a tool used in assessment which entails biological information, thoughts, emotions, behaviors and social factors, which all play a significant role in how a human functions. The biopsychosocial model states that

the workings of the body can affect the mind, and the workings of the mind can affect the body. Turner suggests that a client's perception of health, certain threats of disease, in addition to the dynamics of a person's social or cultural environment, seems to influence the likelihood that a person will engage in "healthy-promoting" behaviors such as medication taking, proper diet, and engaging in physical activity (Turner, 1996). When the biopsychosocial model is used, they also receive information on the client's social background, such as relationships with family and friends, church involvement, outside support systems, traumatic events that have occurred and other pertinent information that is valuable in developing treatment goals for overweight and obese children. It is essential to incorporate all three elements of the biopsychosocial model to have a clear idea of the child's history, psychological state and their social environment when assisting children with child obesity.

Contribution to Social Work Practice Knowledge

This research could be used to implement programs to gain awareness of child obesity and to educate our

clients on possible factors that may contribute to this epidemic. As previously stated, it is the goal to empower clients with knowledge and to educate them on better ways to enhance their lives. At a micro practice level this will provide parents, guardians, and teachers with an insight into child obesity, and some problems that it causes. Social workers have the ability to improve peoples' lives by providing various social services. Part of social work ethics focuses on assisting others with a variety of problems and address their social needs. Providing services and resources to children who are overweight or obese will likely help decrease this epidemic. Social workers need to be attentive to child obesity issues. This awareness will hopefully bring about the development of interventions and their quality of services. Ethically speaking, social workers can promote social justice for children. In addition this is an opportunity for school systems to develop and implement physical education curriculum and fitness activities.

Summary

This has been a brief synopsis of the post positivist paradigm and the rationale for choosing the

paradigm, in which it best represents the focus of the study and allows meaningful data through interviews. The literature touched upon various factors that researchers suggest contribute to child obesity among African American children, such as, socio-economic status, media/marketing, culture, and the school system. Also discussed were macro practice contributions to social work and how beneficial it is for social workers to practice social justice and empower clients to maintain their well-being.

CHAPTER TWO

PLANNING

Introduction

In this chapter information was given on the research site, the participants that will be involved, and background demographics of the participants. In addition, an understanding of possible ethical, political and diversity issues that may arise during this process will be covered. There will be a discussion regarding the engagement process of the parents in this study and the steps that will be taken to ensure everyone's comfort level was suffice.

Research Site and Study Participants

The study was conducted at Eagle Valley School in San Bernardino, CA. Eagle Valley School is a state certified non-public school serving the academic needs of severely emotionally, cognitively, and behaviorally disturbed children who have a difficulty maintaining stability at a comprehensive site. Eagle Valley School is an academic setting designed to ensure the students can develop the necessary social, personal and academic skills to successfully transition to a less restrictive

environment. This campus is responsible for over 60 students.

Within the academic setting the students participate in recreational activities, vocational training and day treatment rehabilitation services that are focused on behavior management and psychological problems. Eagle Valley School was chosen because the administration department was concerned with the increased wave of obese children in the school and their main focus was to promote good quality health. I have established a professional relationship with Eagle Valley School as a Community Liaison.

Eagle Valley School has a small population of students; the majority of the students are African American. It was decided not to allow the children to be directly involved in the study because the research topic was emotionally sensitive to their feelings. Thus, parents of children aged seven to seventeen were the focus of the study. I was particularly interested in African American participants since this culture had the highest obesity rates among other ethnic groups (Institute of Medicine, 2004). I conducted the interview with 10 African American Parents, who were experiencing

or had experience with raising overweight or obese children. Most of these families lived in a low socio-economic environment/neighborhood. Eight women and two men participated in the interview. The age ranges of the parents were between 30 to 52-years-old. Each parent had a student who is enrolled at Eagle Valley School.

Engagement Strategies

Prior to speaking with the parents, the researcher received permission from the Eagle Valley School principal to conduct the interviews with the African American parents. To interest the parents in the study, the researcher made a sincere phone call to each of the parents explaining the research topic on child obesity among African American children. During the initial engagement process, phone numbers and work numbers were collected from the ten participants. Initially the researcher attempted to collect the participants email address as a second form of communication to send a reminder, as well as confirm the date and time to arrive at Eagle Valley School. However, six out of the ten participants did not have access the internet; as a

result all lines of communication were performed by telephone.

Prior to this study the researcher had already established a working relationship with the parents, which provided a major advantage since the rapport was already built. The participants were willing to participate in the study without any obligations or pressure from the researcher. After giving them a complete overview of the project, the researcher informed the parents that the interview would allow them an opportunity to express their thoughts and feelings about raising a child who was dealing with weight issues and the project would be a support system for the parents.

One of the main concerns that most of the parents had was the issue of confidentiality. The parents wanted to make sure the interview would be conducted in a quiet and isolated room and that the information given would not be repeated to their children. The researcher assured the parents that the interview would be held in the clinical office with no other staff present. In addition, the researcher thoroughly explained that the interviews being conducted were strictly confidential and that no information would be passed on to their children. Before

the interviews took place a phone call was made to the parents to schedule a date and time to come to Eagle Valley School and begin the interview process.

Self Preparation

First and foremost, one has to be sensitive when discussing someone's child. So staying sincere and maintaining a calm and compassionate tone would make the parents feel more welcomed. The project was clearly explained, allowing the parents to ask questions during the duration of the study. Also the researcher exhibited good listening skills and was respectful at all times. In addition, remembering to be receptive to others feelings and being non-judgmental also prepared the researcher for the interview. Also to prepare for the interviews with the participants, the researcher reviewed the literature review, to ensure the information was fresh.

Since a relationship was previously established between the researcher and the parents, it was necessary for the researcher to stay focused on the questions, and not venture off into other topics that were not relevant to the interview. Since the researcher is also African American, one has to be very careful with expressing

personal experiences and stories with the parents. The researcher was also aware that during the interview the parents would want the researcher to validate and confirm cultural norms, since the researcher was African American.

Diversity Issues

Being aware of peoples' cultures and ethnic backgrounds was very important. It was also imperative to be culturally sensitive to ones upbringing. The researcher chose words very carefully, thus, eliminating expressions that might be considered rude or offensive. Because this population is diverse, it was vital to take language into consideration and the way others interpret ones speech. It is possible that some parents could feel uncomfortable answering certain questions, assuming it is a direct reflection on ones' parenting skills. The researcher made it perfectly clear that no negative answers would result in the researcher criticizing them. Potentially the researcher might come up against people feeling hesitant to answer questions, they perceive as being personal. If these issues arise the researcher would first reiterate the principles of confidentiality

and allowing them the opportunity to rethink being a participant in the study, or even rewording a question that they do not feel comfortable answering. Culturally speaking, some of the parents may display some defense mechanisms, which might need to be carefully addressed.

With regards to the researcher not fully understanding the families background; it was likely the parents would form some biased opinions of the researcher of there feelings were not being validated. Some participants may perceive the behaviors as being too assertive and formal. Since the parents could relate to the researchers ethnicity, it allowed the parents to be more open and honest about their culture and not feel judged. As previously stated, there could be language barriers that may hinder the participants from fully understanding and internalizing certain questions so the researcher needed to make sure all questions were explained appropriately and thoroughly, allowing questions to be asked, if needed. Overall the goal is to make sure the participants are comfortable and willing to express themselves without restraint during the interviews.

Logistical Issues

Having a relationship with the study site was really essential, since the researcher wanted a place where the participants to feel comfortable at ease. Choosing Eagle Valley School to interview the parents seemed practical since the parents were familiar with the school and the staff members. The interviews were conducted in a private setting; the clinical office. The researcher scheduled the interviews over a period of 2 month, from March 12, 2009 to May 2, 2009. While conducting the interview the researcher took detailed notes to capture the participants' dialogue. There was also a personal journal developed for the researcher to address any special thoughts or feelings the researcher had regarding the interviews. Overall, it was significant to build a rapport with the study site since the ultimate goal was to present the leaders with the data findings and allow the organization to gain awareness of child obesity and possibly change some dynamics of the school system.

Ethical Issues

The researcher had to go through a human subjects review to protect the parents who volunteered for the

study. To ensure the parents were protected with confidentiality, the researcher developed procedures for informed consent and debriefing. Once again, before starting the interviews, the researcher reiterated the topic of the study and the length of time the interview was going to take. In addition, the researcher assured the parents that the interview would be strictly confidential and that their full names would not be identified. After completing the interview the parents, a debriefing session took place.

Some ethical issues that could have perhaps caused a concern were the parents' feeling that the researcher was displaying biased behaviors or seemed slightly judgmental. It was essential for the researcher not to verbalize any personal opinions or question the participants parenting techniques. This technique minimized conflicts and tension when addressing their child's weight issues and when addressing parent accountability. Again, the researcher remained neutral and stayed fully aware of the personal biases. Another ethical concern the researcher had to take into consideration was overstepping ones personal boundaries. Exhibiting this type of behavior could lead to ethical

problems as well. For the researcher, not forming an opinion when participants formulated answers that were ethically questionable, and allowing them the opportunity to express themselves will validate professionalism. If a concern with confidentiality was raised, the researcher reiterated the importance of one's privacy, making sure the observations and interviews stay confidential and also making sure the research data was used appropriately and effectively as stated in the informed consent. The researcher explained to the participants that study was strictly voluntarily and at any time during the interview they could decide not to continue with the interview without any wrong doing.

Political Issues

The researcher was aware of various political issues related to this study. For example, most members of congress have probably never heard from citizens or their comments about child obesity. It is possible that many families and caregivers are unaware how to be active in getting attention and recognition from governors to address this issue. Funding is another considerable factor that relates to politics. Due to recent budget

cuts and the decrease in government grants and programs, it would seem difficult to gain access to funds that could jump start a health and wellness program for children. Confidentiality could also become an issue when dealing with children. A question may also be raised as to why one should focus on a topic such as child obesity due to possible exploitation of unhealthy children.

The government or school district may believe this research project is too broad and ineffective since many individuals may not be concerned with child obesity and the reasons behinds the epidemic. To address these issues and concerns the researcher will have to provide concrete literature and explain various factors contributing to child obesity on a micro and macro level. For example, Brink (2008) reports that advertisers seem to target African Americans with unhealthy food messages. As previously stated, popular black television shows run more food commercial than regular general audience shows. These commercials also seem to focus more on high caloric intake and less on nutritional value (Brink, 2008). Fast food restaurants benefit from children being overweight or obese. They target children with various commercials and happy meal toys.

Summary

In chapter two an overview of the research topic was introduced. It is believed that parents should be conscious of the cause of child obesity and by promoting awareness hopefully this knowledge would encourage a better understanding of children's weight issues. As previously stated, this study was performed at Eagle Valley School, a diverse population of 60 students. In preparing for this project, the researcher discussed possible issues that may arise, such as ethical issues, with regards to confidentiality, displaying culture sensitivity, and addressing political and logistical issues. The matters of diversity were addressed, in the sense of being mindful of the participants' cultural values and belief systems.

As stated, the goal of having a good relationship with the study site was to gain their support in the project, and eventually make use of the data that is given and possibly develop and implement various programs for children dealing with overweight or obesity problems. In addition, finding stakeholders and grants to possibly fund this project would be a political issue, assuming some entity in power would not accept the data as

acceptable research to pursue. Also discussed were the various engagement strategies that were implemented to get this study started.

CHAPTER THREE

IMPLEMENTATION

Introduction

In this next chapter a detailed synopsis of the sample selection will be reviewed. Further discussed is a description of the data collected during the interviews with the African American parents including the general demographics of the participants. This section also gives a detailed view of the data collection phase and all the necessary tools used to complete the interviews. Examples of descriptive, structured, and contrast questions were also explained. Additionally, the researcher will provide how data was collected and a list of instruments used for the interviews. Criterion Sampling and Intensity Sampling will also be covered in this section to explain the type of sampling that was conducted.

Data Gathering

While applying the post positivist paradigm to this project, the researcher determined that conducting interviews would provide more meaningful information. During the interview the researcher asked a series of questions related to child obesity and external factors

related to child obesity, such as marketing, advertisements, and physical activities. In addition, the questions that were developed allowed the researcher to keep the flow of the interview going. The researcher began the interview with demographic questions, such as age, occupation, age of child and their perspective and knowledge about child obesity. After the parents discussed their definition child obesity, the interview questions became more specific about their own child's weight issues. The questions can be found in Appendix A. Throughout the duration of the interviews the researcher employed active listening skills to keep the participants engaged during the interview. Since the researcher was strictly taking notes, it was imperative to also paraphrase and summarize answers to ensure the participants' answers were accurate. During the data gathering it was necessary to be conscious of one's own biased opinions and family values because displaying those behaviors would not be ethically acceptable, furthermore this manner could influence the data. In preparation for the interviews, the researcher reviewed the literature to ensure key questions were being answered.

Morris (2006) speaks of three types of questions that "explore a person's understanding of a research focus and assist in the process of sorting data for later analysis" (p. 96). These questions are labeled as descriptive, contrast, and structured questions. Descriptive questions are overarching questions. An example of a descriptive question that was used during the interview was "What does your child typically eat on a daily basis". Next we have Contrast, which is a criterion that builds on a question. A contrast question used was "Is there anything about your culture that you feel contributes to your child being obese or overweight". Lastly is Structured questions, which expands an understanding of a particular topic. Morris also calls these verification questions, which verifies the researchers understanding of the topic (Morris, 2006). An example of a structured question the researcher used during the interview was "How has your child's weight affected his or her health".

Selection of Participants

When selecting participants for the study, the researcher recruited African American parents, whose

children were students at Eagle Valley School. The researcher considered interviewing the children; however the students are emotionally disturbed and display short attention spans. To obtain a better understanding of child obesity issues and information on external environmental factors that contribute to child obesity, the researcher decided to conduct interviews with the students' parents instead. The researcher recruited eight women and two men to complete the interviews. Prior to scheduling the interviews, the researcher telephoned 12 parents to see if they would be interested in a project. The study was explained in great detail and at the end of the telephone calls 10 parents had volunteered to be apart of the child obesity study.

This study utilized the Intensity Sampling and the Criterion Sampling. The intensity sampling was used because each individual symbolized significant knowledge of their children and rich information regarding personal thoughts and feelings. The criterion applied to the study because the sample size focused on particular ethnic groups, which were African Americans. In addition, the researcher needed data on parents who were specifically raising or overweight or obese children.

Phases of Data Collection

Seeing as though the post positivist paradigm was used for this study, the data was collected through interviews with the participants. Morris (2006) discusses four stages of interviewing; engagement phase, development of focus, maintaining focus, and termination. During the engagement phase the researcher provided an overview of the study with the participants. To ensure the participants privacy and confidentiality were protected, the researcher explained their rights, in detail, and asked all participants to sign the informed consent, in which everyone complied. The researcher really focused on the parts, to make certain they were comfortable and less nervous. In the development of focus phrase the researcher collected demographic information on the participants age, employment, and education level. To maintain the focus of the interview, which means asking essential and meaningful questions focused on the topic; the researcher asked questions geared to the participants feelings, such as "how do you think your child feels about his or her weight." When the researcher sensed more information was needed, probing questions, such as "tell me a little more about that," were asked so

that the participants could elaborate on their questions and the researcher could gain a better understanding of the question. During the interviews the researcher never provided information on child obesity; however the researcher was able to validate the parents' knowledge and comments on the causes of child obesity and how the lack of diet and exercise affects their health. Lastly in the Termination stage researcher announced to the participants that they were coming down to their last question, the researcher also provided a summary of the session. The researcher also expressed gratitude to the participants for being apart of the study and sharing their experiences. When the interviews came to an end the researcher opened the floor for questions. The participants did not receive any benefits or incentives for completing the study.

Data Recording

To obtain essential data, the researcher took detailed notes while conducting the interviews with the participants. The researcher only utilized a notebook to collect the data. The researcher did not utilize any type of videotapes or tape recording to conduct the interviews

with the parents. The researcher also utilized a personal journal to reflect any thoughts or feelings the researcher experienced during the interview. This journal was also used to evaluate the overall quality of the interview.

Summary

This chapter reviewed the implementation stage, which highlighted the phases of data collection and the instruments used during the interview at Eagle Valley School. Also mentioned, were tools used to conduct the interviews, which were outlined by Morris's four stages of interviewing: engagement, development of focus, maintaining the focus and termination (Morris, 2006). In this section the steps of data gathering and data recording were also covered.

CHAPTER FOUR

EVALUATION

Introduction

In the evaluation stage a detailed overview of the data is discussed. The researcher analyzed the interviews and identified various relationships between the categories studied. The data was analyzed using two coding methods; open coding and axial coding. Furthermore the section will discuss how the researcher constructed a theory based on the study.

Data Analysis

The bottom-up approach was used to interpret the data collected in this study. The Bottom-Up approach is explained as "understanding the meaning of language" (Morris, 2006, p. 111). The researcher was able to identify certain thoughts that were repetitive during the interview process, which was essential to interpreting the data and developing a theory. This process also consists of assigning meanings to certain language and interpreting the language into a code that shows some validity to the parent's perspective on child obesity (Morris, 2006). In addition, this approach could find

missing links that would put pieces of the study together. The goal is to understand the interviewee's verbal communication, with regards to tone, informal messages, and the content of what is being answered. Applying open coding to this project best compliments this study.

The open-coding analysis identified ten categories; parents knowledge about child obesity, notice of weight gain, types of food intake, types of exercise received, child's feeling about weight, body images on television, commercials and advertisements, Influence of African American culture, school systems providing physical activities, and child's health problems. Demographically speaking, all the interviewees were African American. A total of eight females and two males participated in the study. When collecting data on the participants' occupation, it was apparent that everyone had diverse careers. Their current occupations ranged from being foster parents, clerical and front office work, school aide, TBS coach, in home childcare worker, stadium employee, and group home services. With regards to socio-economic status, of the participants seventy percent of the participants identified themselves as

low-income and 30 percent considered themselves middle class citizens. Of the participants children 7 of the parents were raising girls and 3 were raising boys.

Parents Knowledge about Child Obesity

When the interviewees were questioned about their knowledge of child obesity, eighty percent of the participants (8) related child obesity to children overeating and the lack of children exercising and engaging in physical activities. One participant reported, "I really don't know too much about child obesity, even though my son is obese. I couldn't tell you the definition or anything but I would say it's caused by kids eating fatty foods and not getting enough exercise. They just eat a lot which makes them overweight, and when kids are overweight they don't have the energy to workout" (participant 2, personal communication, June 2, 2009). Similar to the first response, another participant stated, "That it is the fastest growing medical concern in children today being over weight. It's because children are overeating and eating too many fatty foods and sweets" (participant 3, personal communication, June 2, 2009).

Another noticeable theme the researcher observed was parental responsibility. Although they understood the common aspects of child obesity, they also held themselves accountable for their child's current weight problems. A 39-year-old mother of her 12-year-old daughter stated, "I believe that child obesity starts when they are infants and that the parent has control over what a child should or should not eat. And at some point parents start letting their children eat whatever they want to eat and then the weight gets out of control" (participant 1, personal communication, June 2, 2009). Another participant stated, "It's a major issue in our society. Most children who are obese have obese parents. Children who are obese do not get the recommended daily value of fruits and vegetables and I'm actually guilty of that. Kids are big because of their family" (participant 4, personal communication, June 3, 2009). A third participant reflects on her daughters' weight gain, and agrees that parents play a significant role in their child's life, stating "I take blame for her weight now because I could have prevented it long time ago if I had the patience, but I didn't and now her weight has gotten out of control. I think back and just wish I could have

done more" (participant 5, personal communication, June 2, 2009).

During the interviews the researcher noticed some of the parents becoming very emotional, at times tearing up, when discussing why they held themselves accountable for their child's weight. The parents wished they would have demonstrated more self control and provided their children with more nutritious meals, instead of letting them eat high caloric meals and ignoring the real problem. During their vulnerable state the researcher offered tissue and provided time for the parents to take a break and gather their emotions, if it was necessary. Although breaks were offered, the 3 parents declined and continued with the interview. The researcher reiterated to the parents that the interview could be stopped at any time they felt uncomfortable during the interview process. Due to the researcher and the participants being ethnically matched, the participants felt very comfortable with sharing their stories. It was as if they knew the researcher could relate to the African American cultural and the history of "soul food." Because of natural human emotions, there were times the researcher became emotional when listening to the participants

responses. The researcher felt the sincere pain and regret the parents were experiencing.

When Parents Noticed Weight Gain

Several participants noticed their child's weight gain between the ages of 4 and 5-years-old. Most parents admitted to feeding their child excessive meals due to the child's request. One parent said,

She has been experiencing weight problems since she was 4-years-old. She use to always ask for seconds and at that time I thought it was apart of her growing up. I didn't think anything of it. She wasn't really big back then but she was kinda thick for her age. When she was about 4½ I noticed her gaining more weight than usual but I really didn't do anything about it. I just gave excuses like she's just growing up and getting taller but when she wasn't getting any taller you could really see her weight gain. (participant 1, personal communication, June 2, 2009)

Other participants explained that between the ages of 4 and 5 years children start sprouting and getting taller so them eating a lot of food was a sign of them growing. They did not see it as a sign of being

overweight because their child was consuming food and not gain excess weight. A 37-year-old mother stated,

I noticed my son having weight problems when he was about 4-years-old, and now he's 14. In the beginning I just thought he was going through a phase, you know how kids get baby fat but as they grow up they start slimming down. So I didn't think anything of it. We use to call him 'big man.' We even made little jokes about his weight, not knowing he would grow up to be so big. (participant 6, personal communication, June 3, 2009)

Some of the participants assumed their children were going through a growing phase and really didn't pay close attention to they types of food they were consuming nor the amount. Although most parents recognized the weight increase, one parent insisted she was unaware of her daughter's heaviness because it was drastic and quick. This mother continued to report,

When it was too late, she gained weight very fast. She gained weight when she was almost 4-years-old. She just loved to eat and it didn't bother me because she wasn't gaining weight, but one day she was just big, and I was like what the hell happen to

my baby. I couldn't believe how much weight she gained. Now I know that doesn't seem realistic but it seemed like she gained weight within 2 to 3 weeks tops. It was really quick and I didn't know what to really do because she was so use to eating all these sweets and fried foods. (participant 10, personal communication, June 3, 2009)

Lack of Exercise

Eighty percent of the participants (8) said that their child may be involved in physical activities at school. They also were familiar with Eagle Valley School's P.E. curriculum, implying that the school is supposed to provide physical education classes daily. Although parents stated there was a lack of physical activity in their child's environment, the researcher noticed that when this question was asked, most of the participants tried to think of some activities that their child was involved in. One parent stated, "He really doesn't exercise, like do sit ups or run at home. But I know he runs around at school because I get calls that he's not in class like he's suppose to be and he's running up and down the halls for no reason. I mean none of us exercise at home and we should because most of us

have weight problems" (participant 6, personal communication, June 3, 2009). Another parent said, "I really wouldn't call it exercise but he has a lot of energy and he runs all around the house. That has a lot to do with his ADHD. He tries to play with his sisters outside but he can't keep up He might get exercise at school but I'm not too sure" (participant 2, personal communication, June 2, 2009).

Most of the parents were unsure if their child was participating in P.E. at Eagle Valley School, however it seemed as if it made the parents feel better if they said their child was involved in some type of physical activity. One parent made a little humorous joke stating, maybe twice a week, she walks up the street to the liquor store to get some candy or milk or something else but other than that she's kinda lazy and really don't wanna exercise. Sometimes I tell her "hey lets go walking today" she would say "nah mama, I'm tired" So I don't fool with her, I just let her be. It's hard to help somebody who doesn't want help, so I just pray everyday that she starts eating healthier so that she can live a long life. She's too young to be having any health problems.

(participant 10, personal communication, June 3, 2009)

Out of the ten participants only two parents reported their child as being involved in either basket ball or cheerleading. A 38-year-old mother stated that her 8-year-old daughter is enrolled in cheerleading classes at the YMCA, and she is also learning how to ride her bike (participant 8, personal communication, June 4, 2009). One father reported that his 9-year-old son plays basketball 3 to 4 times a week, he likes to play football. The father said his son loves to do more activities when he is involved (participant 9, personal communication, June 4, 2009). The support appears to increase his son's self-determination and allows for father and son quality time. When the researcher asked what their children mostly participated in while they were home from school, ninety percent of the parents stated their child watched between 4 to 6 hours of television everyday. A couple of children spent at least 2 hours on the computer during their free time.

Type of Food Intake

The participants discussed the types of foods their child consumed on a daily basis. During the interviews,

it was apparent that the children ate a lot of fried chicken, cornbread, frozen burritos, and a lot of candy and sweets. One mother says her 14-year-old son usually eats fried chicken 2 to 3 times per week. He also eats Churches Chicken, fries, chips cookies and he always sneaks sweets. When she is not home, her son eats frozen burritos, at least 2 to 3 and he also eats frozen dinners (participant 6, personal communication, June 3, 2009). Another mother stated "my daughter eats sandwiches, top ramen, chips, juice, Gatorade, ice cream and that's before dinner. During dinner, well depending on if I cook or not she might eat pizza, fried chicken with bread, or tacos" (participant 7, personal communication, June 4, 2009).

Another theme the researcher noticed was recognizing that most of the children were sneaking sweets, getting candy from school, or purchasing candy from the store. One parent stated,

I normally cook baked or fried chicken, vegetables and rice...or he'll eat frozen pizza or frozen dinners. If I don't feel like cooking the kids know how to heat up frozen dinners. He also eats a lot of sweets at school, and the only reason I know this is

because he tells me and he's always coming home with candy in his hands. Sometimes I have to get it from him before he gets it all in his mouth. (participant 9, personal communication, June 4, 2009)

Children's Feelings about their Weight

The majority of the participants stated their child expressed some discomfort with their weight. In addition, it was also apparent that most of the parents' daughters had tried to go on diets to lose weight, however; their efforts were not successful. It appeared the girls were unable to abide by the diet regimen and quickly cheated. One mother stated,

My daughter wants to lose weight, sometimes when she talks about her weight, she wants to go on a diet but it never lasts long. I think she wants to be skinny...well I won't say skinny but I know she wants to be smaller and sometimes she gets frustrated when she can't lose weight or when she goes on a diet and cheats after the first day, like most of us do. I know she loves herself but she wants to look and feel pretty and she wants guys to find her attractive. She has her days when she's fine but I think she just copes with being a big

girl. (participant 5, personal communication, June 2, 2009)

Another parent, with a similar response, stated,

She hasn't made it an issue, but every blue moon she'll say lets do the 3 day diet, and of course I do the diet with her she usually cheats the very same day, and when I tell her to just keep going, she just stops the diet all together. It's like when I try to motivate her it doesn't seem to work, and I don't know what else to do. I know she doesn't like her size and I know it hurts her feelings when she see's the other kids running and playing outside.

(participant 3, personal communication, June 2, 2009)

However, of the entire parents who talked about their child's feelings, one parent was really adamant that her 11-year-old daughter was comfortable in her body because she taught her to embrace her body. She said,

She loves her size. She knows she's a beautiful big girl. I tell her she's a princess everyday. She's only 11-years-old so she still has some growing to do. I never hear her talk about losing weight but sometimes she says she wishes she looked like Hannah

Montana, but that's about it. I think she says that because she loves the show I don't think it has anything to do with Hannah being skinny.

(participant 8, personal communication, June 4, 2009)

The researcher noticed the majority of the mothers all reported the need to support their daughters by going on the diet with them.

Body Images on Television

Most of the participants strongly agreed that certain body images on television have a negative effect on their child's weight. Participants explained that television does not compliment all body types; in addition they portray skinny body images as the perfect size. One parents stated,

Yes, when she sees skinny anorexic women and girls on TV. It's a shame that they always have these skinny girls on TV there not really the average body type. This is why you have all these girls starving themselves and becoming a bulimic. It's telling young girls that in order to be pretty you have to be skinny and be a size 2, but as you can see most black girls aren't built like tooth picks we have

butts and hips. (participant 8, personal communication, June 4, 2009)

Some mothers noted that they have to constantly praise and compliment their child so they do not associate being plus size with being unattractive.

Only twenty percent of the participants said their child was not affected by body images on television. Surprisingly enough, both children were boys, ages ten and fourteen years old. One parent said her son doesn't really focus on men or women's body types on television and that those effects are more prevalent in girls. She also stated, "Men on television have all body types, big, small, and fat, it doesn't really matter. Sometimes he compares himself to Cedric the entertainer (a comedian) because he's a big guy and he's funny" (participant 6, personal communication, June 3, 2009). A 52-year-old mother stated that her son watches Spiderman Sponge Bob, and the cartoon network and he's hardly focusing on body images. In addition she added, "If anything he probably wishes he had a suit like Spiderman" (participant 2, personal communication, June 2, 2009).

Another parent stated,

When she sees the girls on television she always asks me is that what pretty looks like. I have to constantly remind her that she's just as pretty as the girls on TV. People really need to pay more attention to what their children watch on TV, because sometimes it can really affect their self-esteem, and the last thing I want is my baby feeling all depressed because she's not a size to like the kids they show on TV, or even other shows. We have to tell our kids that there beautiful.

(participant 1, personal communication, June 2, 2009)

Commercials and Advertisements

This code was built since eighty percent of the participants stated they believed, to some degree, that commercials and advertisements are partly responsible for the increase in child obesity. Although the participants expressed some dislike with the advertisement industry most of them reverted back to parents being responsible for their child's health. One mother reported, "In some ways it does and in some ways it doesn't. Every time you turn around you see they have commercials on TV. Its

really ridiculous how they have all these commercials and all they advertise is McDonalds, new Oreo cookies, just stuff full of sweets" (participant 4, personal communication, June 3, 2009). Similarly, another parent seemed rather displeased with commercials in particular. She stated that,

I have to learn that these people aren't concerned about my child's weight. They don't care that she's overweight and can't have all this sugar they be advertising. It's like their teasing the kids; they need a balance of sweets and vegetables. I just don't get it. It's like they think its ok!! I'm not trying to fully blame them for my daughter's health because I'll take responsibility for that but they sure don't help when they show all these commercials. (participant 10, personal communication, June 3, 2009)

Another parent compared commercials and advertisements that are geared towards children as similar to "hanging a bone in front of a dog" stating if children see it there going to want it (participant 7, personal communication, June 4, 2009). During the interviews the researcher noticed the tones in which the

participants spoke, when responding to advertisements. The participants seemed slightly angry and appeared to have minor attitudes when linking commercials to child obesity, however, when they talked about holding themselves responsible for their child's weight, they spoke in a soft and somewhat shameful tone. At times it was difficult for the parents to hold themselves accountable; nonetheless as the interviews continued the parents felt more comfortable and able to speak the truth, even if it meant partly blaming themselves.

Influence of African American Culture

This code was created because eighty percent of the participants felt that the African American culture played a significant role in their child's weight. The participants really capitalized on the African American culture, and their love for fried and greasy foods. Nine out of the ten participants explained that they cook fried chicken at least once or twice a week. One parent stated "we are known for eating fried food, fried everything. My mom cooked soul food and she taught me how to cook, so if you grow up cooking soul food, that's kinda all you know and it's what you like. Black folks are known for eating greasy foods, like I said it's apart

of our culture and it's hard to change from eating bad to eating healthy" (participant 4, personal communication, June 3, 2009). To add, another participant expressed her feeling about the African American culture and she also agreed that her culture consumes a lot of unhealthy foods, such as cornbread, potato salad, pork, beef, and fried foods. She also noted that African Americans were unaware of portion sizes which are also related to being overweight (participant 2, personal communication, June 2, 2009). The participants also discussed health problems that were prevalent in their family, such as, high blood pressure, diabetes, and strokes. Of the participants, only one participant stated there was no correlation between her culture and her child's weight. She reported that when she was old enough to realize the negative effects of her families eating habits, she steered away from her culture when it came to cooking because she understood their food regimen was unhealthy (participant 3, personal communication, June 2, 2009).

School Systems Providing Physical Activities

This particular code was chosen because half of the participants agreed that school systems provided enough physical activities for students and the other fifty

percent argued that school systems have become lazy with offering students a variety of activities that meet their interest. One parent stated,

They don't provide enough activities for the kids. They need more structured activities that are fun for them. If you make it look appealing then they might be interested. You have to get creative with these kids now a day. You can't just say go run the track, or let's do some pushups and sit-ups. You have to find things the kids like and that will keep their interest. I think the school systems could do better and also try and motivate the kids to wanna feel better. (participant 7, personal communication, June 4, 2009)

Other parents reported their child is not receiving any type of physical education curriculum because the students refuse to participate in the activities. Although the other fifty percent of the participants agreed that school systems provide an adequate amount of physical activity, they didn't provide the researcher with a detailed answer about the school systems activities. The participants assumed it was apart of the curriculum and mandated by the San Bernardino Unified

School District. Although it was not common in the results, a few parents commented on the difficulties of trying to encourage the students to participate in PE activities, stating some students refuse to actively partake in any exercising behaviors. Some parents identified their child as being lazy.

Axial Coding

Culture and Food Consumption

There was a significant link between the African American culture and the types of food the children were eating. Ninety percent of the parents reported that within their house old, they cook a significant amount of fried foods, in which their culture is accustomed to. The parents discussed the family cycle of making soul food dishes that has been passed on for many generations. It is without a doubt that the African American culture is very popular for cooking soul food dishes. As previously stated these food traditions are being passed down to family members as a way to build connections and increase family time and engage in various rituals. The parents explained that the word "soul food" is deliciously soothing comfort food, which originated from the south.

In addition it brings back heart felt memories of family dinners and quality time with loved ones. Although these traditions still exist in families, the parents admit to not taking health into consideration. Their main focus was making fabulous and delicious dishes for family members to enjoy. Most of the parents agreed that there was not a lot of emphasis on eating healthy and educating yourself on portion control and exercising

Gender and Body Images

There appears to be a correlation between young girls, in reference to body images on television. The researcher's data showed that adolescent boys were not really affected by ideal body images portrayed on television. However, among young girls, this ideal to be thin was more prevalent. Although the adolescent girls were overweight or obese, they idealized young girls on television, such as Hannah Montana or iCarly and wished they were smaller. The parents reported that their child's self esteem lacked somewhat due to the media's portrayal of perfect body images. Although the girls idealized the stars on television, it was not enough encouragement for the girls to actually diet and exercise to lose weight. Most of the young girls tried diets for 1

to 2 days and immediately quit and refuse to partake in any physical activities or meal with low calories.

Selective Coding

As defined by Morris (2006) "selective coding is the process of integrating and refining the categories and their dimensions to develop theory" (p. 116). While reviewing the data, it became apparent that Culture and parent responsibility were two significant categories. To begin, ninety percent of the parents attributed their food choices to their culture. Although culture played a significant role in the types of dishes they prepared, they parents stated there was never any education related to eating healthy and showing good portion control. Also in the African American community the parents felt as if being thick or overweight was portrayed as having curves or "meat on your bones." Most of the parents stated that being plus size was also seen as being big and beautiful.

Another common link that generated from the study was parents taking responsibility for their child's current weight status and health concerns. The researcher recorded an abundance of remorse from the parents for not making their child's health a priority when they were

younger. Most of the parents noticed their child's weight problems between the ages of 3 to 5-years-old, however they shared various reasons as to why their weight was overlooked. Some parents shared that they assumed it was baby fat that would eventually go away as they developed and got older. Other parents reported that they used feed as sort of a crutch, especially when it came to sweets and candy. Some used food as a type of reward system for displaying good behaviors. Although they recognize the potential harm now, the parents find it more difficult to try and change eating habits now that the children are older. While speaking with the parents the researcher was surprised to see how brave the parents were in admitting their faults. Even though some of them became very emotional during the process of verbally taking responsibility for being enablers, they still had hope for the future and vowed to start making changes in their household

Implications of Micro and Macro Practice

On a micro level this topic gives professionals and social workers opportunity to educate parents on the risks and dangers of child obesity. As social workers we

have an obligation to insure the best interest of our clients, and with the child obesity rate increasing, it is very important to start alarming people of these risk factors. Cultural and food appears to be a significant part of the African American culture. Traditional recipes passed down from generations, family favorites, and Sunday dinners are important to the families. It is also considered part of a heritage, in which food is used to nurture the body and soul. It is beneficial to educate families on the food pyramid and daily dietary needs, therefore, to assist African American families in making healthier lifestyle choices we should consider offering cooking techniques that will reduce health risks, such as broiling or baking chicken; replacing fats, such as butter or grease with olive or canola; steaming vegetables and adding a few spices; replacing heavy creams with low fat. Those are a few cooking techniques that could jump-start the process. As social workers we need to teach these parents how to maintain portion control and fit more vegetables and fruits in their diet. It would be beneficial to encourage the parents to keep a food diary to monitor what their child is eating. Often times seeing a visual makes you more aware of the

problem. During the interview, the participants noticed the onset of their child's weight gain, which were between the ages of 4 and 5-years-old. More research needs to be conducted to explore why child obesity is starting at a younger age.

Child obesity is a serious problem with many health risks and social consequences that often carries over to adulthood. Implementing Weight Loss programs that would allow all children and adolescents the opportunity to become healthy and fit would be a good beginning to addressing the issue. In addition, there is also a need for physical activity inside the home, as well as at school. The students could also benefit from teachers adding food and nutrition topics to their curriculum to enhance the student's knowledge and awareness regarding healthy eating and exercise. In the homes, parents need to limit the amount of time their child watches television. The increase in television hours adds to a child's weight gain, due to the child munching on snacks and sodas. This behavior also decreases physical activity. The parents could also benefit from a Registered Dietitian to help them develop meal plans for the children that meet their lifestyle. This would also

provide support for the parents. Depending on the comfort level of the parents, it may be helpful to have the parent and the supporter ethnically matched. A comfort level is established if they feel they can connect with someone on a personal level, particularly cultural. During the interview the parents were less embarrassed and more open to being honest and appropriately critical of themselves.

Limitations of the Study

Although the interviews were very helpful, it was very difficult for the researcher to conduct the interviews and not be able to provide the parents with resources that would assist with their child's weight problems. Many of the parents were seeking answers and information that the researcher did not have available, such as locations to free weight loss programs and weight loss camps for low-income families. Another limitation was not being able to follow up with the parents to see if there were improvements or lack of improvements in the new life style changes they vowed to implement. This limitation was due to students graduating or moving to other schools. Interventions need to be based on these

findings. Although the sample size was small, there was significant data that would benefit from intervention programs. The fact that so many parents are reaching out for support would be something to recognize. Due to the consistency with the lack of physical exercise and proper eating, this should raise a concern for young African American children. Although the sample size of this study was small, the study could be the beginning to exploring child obesity, at a younger age, and developing ways to address healthy lifestyles in African American families. In addition, interventions should also be based on this study because the literature supports the findings that by promoting physical activity and healthy foods, a child has a better chance at sustaining good health.

Summary

In this section the researcher identified and defined open coding, axial coding and selective coding. The researcher also described the association between the categories and shared the parents' perspective on their child's existing weight problems. Also covered were the implications of micro and macro practice, in addition to the researcher's limitations of the study.

CHAPTER FIVE

TERMINATION AND FOLLOW UP

Introduction

In this section the key findings of the research study is presented. An explanation of the parents responses will be addressed, along with the parents' need for educational and intervention services. Also covered was the termination phase of the study participants, in addition to the ongoing relationships with Eagle Valley School to collaborate on a future Health and Wellness program.

Communicate Findings

After analyzing the interviews, it was apparent that various external factors, such as, commercials, advertisements, television shows, and the school systems did not play a significant role in African American children being obese. Most of the parents held themselves accountable for their child's weight problems. The parents also expressed their feelings of guilt for allowing their child's weight to get out of control. When speaking verbally, the parents felt ashamed of the responses to the questions that were asked. Some were

even embarrassed at the lack of support they had given their child. It appeared that the parents wanted to help their children, but at the time, it seemed easier to give the children what they wanted out of convenience. Every parent was concerned about their child's weight problems because they feared it could lead to numerous health problems. At this time, there were only a few children who were experiencing major health problems. Those diagnoses varied from borderline diabetes to severe asthma.

The researcher also learned that culture and poor eating habits played a significant role in child obesity. Eighty percent of the parents reported that the African American culture has a lot of dishes that are high in calories. The parents seem to embrace the cooking techniques of their culture, however they are also aware that these dishes, such as fried foods, and pork need to be eaten in moderation. Most of the families understood that portion control was a key factor in implementing a good healthy lifestyle, however the parents expressed their struggles with teaching their child about healthy eating habits.

In general, the parents attest to foreseeing the possible rebellion and defiance that would occur if they began introducing nutritious meals into their family lifestyle. Although the parents struggled with their approaches and attempts to assisting their children with their weight, they appeared to be sincerely concerned and frightened for their child's health. It was also evident that the parents were seeking some type of outside resources, such as, intervention programs or weight loss programs that would be beneficial to their child's health. There was definitely a concern regarding the financial aspect of affording these programs. Due to most of the family member being low income, they were unable to afford the cost of various weight loss programs or treatment centers. The parents expressed their knowledge of limited supportive programs, but overall they were willing to seek any type of free resources or services to assist with their child health.

Termination

Terminating the study was fairly rewarding and insightful. The researcher contacted each participating parent, by phone, and thanked them for their

participation in the child obesity study and giving honest feedback. The researcher also conveyed gratitude to the principal of Eagle Valley School for his cooperation, support, and allowing the study to take place at the school. The principal was appreciative of the interviews because it was an eye opener for the parents to realize the potential harm that child obesity poses their child's health and well being.

Ongoing Relationship with the Study Participants

After conducting the interviews with the parents and showing gratitude for their participation, the researcher did not stay in contact with the parents. Various students moved to new schools or graduated from Eagle Valley School. The researcher was able to stay in close contact with the principal at Eagle Valley School. The school is currently in the process of developing and implementing a new Health and Wellness Program. The organization building this program to address weight issues within the school. Overall the goal is to promote healthy eating and daily exercise activities. The principal expressed his interest in collaborating with

the researcher in the future to help educate adults and staff members on this epidemic.

Summary

This chapter discussed the researchers' communication process and how the key findings were addressed. The termination process with the study participants was also covered, in addition to the essential need for on going relationships with Eagle Valley School to assist with a new project that will be implemented in the near future.

APPENDIX A
DATA COLLECTION INSTRUMENT(S)

RESEARCH QUESTIONS

1. What is your age
2. Are you single, dating, or married
3. What is your occupation
4. Do you consider your socio-economic status as lower, middle, or upper class
5. What do you know about child obesity
6. At what point did you notice your child experiencing weight problems
7. What does your child typically eat on a daily basis
8. What type of exercise does your child receive on a weekly basis, if any
9. How do you think your child feels about his/her weight
10. Do you think certain body images on television have an effect on your child's weight
11. Can you estimate how many hours of television your child watches per day
12. How has your child's weight affected his/her health
13. Do you feel that advertisements and commercials contribute to your child's weight problems
14. Do you have access to a grocery store near your residence,
15. Where do you do most of your grocery shopping, and why
16. Is there anything significant about your culture that you feel contributes to your child weight
17. Do you think the school systems provide enough physical activities for the student

APPENDIX B
INFORMED CONSENT

INFORMED CONSENT

The study that is being presented to you is designed to learn about the increase in child obesity rate among African Americans. This study is being conducted by TyYendra Moore, a MSW student, under the supervision of Dr. Laurie Smith, Department of Social Work. This study has been approved by the School of Social Work Subcommittee of the Institutional Review Board of California State University, San Bernardino.

In the interview you will be asked a series of questions related to child obesity and eating habits. These questions, which are focused on cultural norms, will take 45 minutes to an hour to complete. Please be advised that all of our responses are strictly confidential and will be secured by the researcher. The data given will only be discussed in group form. Once this study is complete, you may receive a copy of the results on September 1, 2009 at 1053 N. Dst, San Bernardino, CA, 92410. Your participation is completely voluntary. Any time during the interview you have the right to not answer questions or withdraw from the study without any consequences. Once you complete the interview about child obesity, you will receive a debriefing statement explaining the study in greater detail. To make certain this study retains its validity, we ask that you not discuss this study with other parents who are participating. There are no foreseeable risk factors pertaining to this study. In addition there are no benefits or incentives provided for participating in this study.

If you have any questions or concerns regarding this study, please feel free to contact Dr. Laurie Smith at 909-537-3837.

By signing the line below, I recognize that I have been fully informed and I understand the nature and purpose of the study, and freely consent to participate. I also acknowledge that I am at least 18 years of age.

Signature _____

Date _____

APPENDIX C

DEBRIEFING

DEBRIEFING STATEMENT

This purpose of this interview was to get your perception of child obesity to see if you could give any insight to certain causes and effects of child obesity. The goal of this study is to get a better understanding of your knowledge and provide additional research on child obesity and other fundamental factors that contribute to this topic being an epidemic. I am interested in providing resources on the obesity of children and possible interventions that can be administered to endure the health of our children.

I truly appreciate your participation in this study. Your feed back was helpful for my research. If any questions arise regarding this interview don't hesitate to contact TyYendra Moore or Professor Laurie Smith at (909) 537-3837. If you would like to obtain a copy of the result for this research study, it will be available at the end of fall quarter of 2009.

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