

[research profile] BY ANDREW CURRY

Parental Involvement

Can healthy behaviors be passed down?

MYLES FAITH, PhD

Occupation

Childhood Psychologist,
University of Pennsylvania
Center for Weight and
Eating Disorders

Focus

Type 2 diabetes prevention
in overweight youth

Funding

ADA Clinical Research Award

Psychologist Myles Faith, PhD, has been working with overweight kids for more than a decade. But it was only recently that he started thinking about a connection to diabetes. “I discovered that many of the children I saw had family histories of type 2 diabetes and elevated insulin and glucose levels,” Faith says.

Obese children are already at a higher risk for type 2 diabetes. By looking for the causes of childhood obesity, researchers can help head off diabetes before it has a chance to develop. Faith—a researcher at the University of Pennsylvania—is

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Faith is looking at how moms and dads influence kids' food choices.

CHRIS CRISMAN

trying to figure out how parental behavior figures into the picture.

His current study, at the University of Pennsylvania's Center for Weight and Eating Disorders, monitors 60 overweight Philadelphia-area children between 4 and 8 years old. All of them have at least one family member with type 2 diabetes. "The genetic deck is stacked against you as a child at risk for type 2," Faith says. "We want to know what we can do to reduce that risk."

Half the families in the study will be given standard information on exercise and healthy eating. The other half will take part in an intensive behavior modification program designed to see just how influential parents can be when it comes to their kids' food choices. At the end of the study, Faith will compare the two groups to see if behavior modification had a measurable effect on the children's weight and body fat levels.

The study targets a group that hasn't been examined closely: young children. Faith says there's increasing evidence that it's important to create healthy habits early. While most childhood obesity studies have looked at kids

between 8 and 12, researchers have recently begun looking at children as young as 2. "New data suggests that in fact weight loss is more successful with younger children," Faith says. "But the research with preschool age kids is really limited."

As a clinical psychologist, Faith is focusing on eating patterns and body weight—specifically, how and why children develop preferences for certain foods over others, and how eating patterns impact their overall health. "We try to tease apart genes and environment," he says. In other words: "We try to figure out why some children like cupcakes more than others, and why some children like apple slices more than others."

In previous studies, Faith has looked at how parents can shape the food choices their kids make. For example, his research has shown that negative tactics like restrictive diets can backfire. In a 2004 study of 57 Pennsylvania children with a family history of obesity or diabetes, Faith found that such diets actually were associated with weight gain.

In the current study, the goal is to teach one set of parents to use "positive parenting" techniques like role modeling and reinforcement with praise. "We retrain parents to focus on what's going right, to set goals and make healthier food choices," he says. Parents are encouraged to introduce new vegetables and fruits to the dinner table, with the idea that, when kids see their

parents eating right, they'll be encouraged to follow their example. Another aspect of the study encourages exercise by giving half the kids pedometers, small devices that help measure how much they walk each day.

A potential side effect of being a good role model, of course, is that parents with diabetes will adopt healthier habits themselves. After all, even the best-intentioned moms and dads face a daunting array of challenges. Sometimes the adversary is as close as the other end of the dinner table, says Faith: "One parent might be on board and ready to make changes, but there's a father or grandparent who doesn't want to give up their favorite dessert."

Meanwhile, healthy food on the table at home might be undercut by, say, greasy pizza on sale at the school cafeteria. And families in urban areas don't always have access to safe sidewalks, parks, and playgrounds where kids can walk and run. And then there's TV: "Children are exposed to lots of advertising for food products," Faith says. "There's evidence these commercials can act on a child's food choices."

"Parents want their children to be healthy," he adds. "We want to empower them to make healthier choices, to help parents be better role models for their children."

Andrew Curry is a freelance writer for publications including Smithsonian and Wired.

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