

31 families with overweight/obese children from the Pediatric Unit Hospital "G. Martino" University of Messina were selected after an assessment by a pediatrician to confirm overweight and obesity diagnosis. Children meeting these criteria were recruited between September 2012 and June 2013 however the study is still in progress and Authors are recruiting other subjects. Children who had diseases such as diabetes, hypothyroidism and genetic syndromes were excluded. Pediatricians described the research and invited selected subjects and their families to participate in the study. The subjects who agreed to participate, were given an informative brochure and consent form about psychodiagnostic evaluation.

The study involved 31 families: (16 fathers, 30 mothers and 31 children), however only 15 families completed evaluation; 15 fathers and one mother didn't answer the questions for different reasons (absence, lack of will, contrasts with wife, lack of time).

Measures

Socio-demographic questionnaire, questionnaire about eating and physical habits, family nutrition and physical activity interview [15], eating disorder inventory 2 [16] and parenting styles dimensions questionnaire [17] were administered to the parents. Socio-demographic questionnaire, questionnaire about eating and physical habits were administered to the children.

Socio-demographic questionnaire

Socio-demographic questionnaire provided information about sex, age, marital status, educational qualification, employment and anthropometric measurements such as weight, height and BMI of parents; sex, age, weight, height, BMI, percentiles and number of brothers and sisters were collected from children.

worried from adult life and maybe from their role in the society but data aren't totally reliable because of small clinical group.

Authors worked on questionnaire about eating and physical habits of children and data revealed that 25.8% of children indicated French fries and sweets as favorite food, 22.6% pizza and only 9.7% indicated fruits and vegetables as favorite food. 25.8% of children usually eat snacks and sweets in secret and 70.9% eat something far from the main courses. Children play with parents 8.84 hours per week, they watch TV and play with personal computers 15.08 hours per week, they go for a walk 2.45 hours per week and they play sport 1.9 hours per week. Only 6.4% of children are involved in other extra activities (playing piano and clarinet).

In general, even if familial nutritional and physical habits look healthy (FNPA 22.65 ± 2.73), answers from children are a bit worrying; children have unhealthy preferences about food, they usually eat in secret and they don't play sufficient physical activities.

Why are data so opposing? Why did paper find anything "wrong" with parents? Author believes that other evaluations have to be conducted with parents because clinical group is really small and it can't be considered a sample; families could show pathological elements from a perspective it can't be . 0p4d [(t-5(c)-3(annEMC /eJ EMC 64 Tw -17k/Span <

Descriptive analysis

Descriptive statistical analysis (mean, standard deviation, frequency counts and percentages) revealed that there weren't any significant results because parents didn't show pathological characteristics except for mothers' Maturity's fear scale (MF) of EDI 2 that measures fear of facing the demands of adult life. According to the parenting styles questionnaire, parents didn't show a specific parenting style; anyway mothers showed a tendency toward an authoritative parenting style (24.93 ± 4.37 ; Cut off =30) (Table 4).

Discussion

Present psychodiagnostic evaluation seems to underline that parents and children with pathological BMI didn't show unhealthy nutritional and physical behaviors as family nutrition and physical activity screening tool [15] evaluated (22.65 ± 2.73) and only 15.6% of the sample gave a low FNPA total score showing unhealthy lifestyles and habits. Moreover descriptive statistical analysis of eating disorder inventory 2 and parenting styles dimensions questionnaire [17] revealed no pathological answers from parents. Mothers seem to be

family analysis to find something more than nutritional and physical habits. Therefore, future researches are going to work with body and mind because they are linked in a dysfunctional "dance" with specific familial contexts [20].

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