How do contemporary adolescent - parent triads conceptualize the concept of health?

The World Health Organization (WHO; 1948) has defined health in three parts of well-being which include, physical, mental and social, not simply an absence of disease or illness. Adolescence is a period of risky time for the development of obesity, and obesity has many lasting physical and psychosocial consequences (Jones & Vaterlaus, 2014). Family contexts are important for making diet and exercise decisions (Freeland-Graves & Nitzke, 2013) and psychosocial development in general (Bronfenbrenner, 1979, & Lytle, L. 2009). In order to understand adolescent health and behaviors surrounding health a common definition should be identified and used within a family. Studies regarding family health frequently consist of only one person from the family and the health care provider (Persson & Benzein, 2014). Additionally, health research is focused on the adolescent alone or one parent. Much of that literature with respect to adolescents contains a focus founded on specific singular categories of the WHO’s definition like obesity, disease, or mental illness, but are deficient in the entire scope of wellness (Kircaldy, Shephard, &Siefen, 2002; Rolland-Cahera, 2011; Skelton, Buehler, Irby & Grzywacz, 2012). This study is unique in that it investigates health from a triadic versus a dyadic or singular lens. Researching the adolescent-mother-father triad grants another avenue to understanding perceptions of health, through the perspective of the adolescent and the inner circle of their family influences. Adolescents’ perceptions of health are formed from a foundation of their relationship with their parents. The focus of this research was to understand the definition of health from the adolescent’s perspective in relation to that of their parents.

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