



Health Connections

LINKING NUTRITION RESEARCH TO PRACTICE

PART ONE: RAISING HEALTHY EATERS

Benefits and Challenges of Gathering Around the Table

“Since Eve ate apples, much depends on dinner,” wrote Byron in the 18th century (*Don Juan*, Canto). Today, interdisciplinary research suggests that family mealtimes are associated with a variety of indicators of children’s health and well-being. *Health Connections* discusses the importance of mealtime as an opportunity for families to spend time with children, adolescents and teens, offering nutrient-rich meals in an enjoyable, instructive and productive setting. This issue (Part 1, Summer) discusses parenting styles and tips for feeding young children. Part 2 (Fall) will discuss healthy eating for adolescents and teens.

Background

Raising healthy eaters requires a multi-faceted approach involving and understanding the roles of children, parents, families, schools and communities, as well as the food, restaurant, entertainment and advertising industries. Common obstacles to family mealtime include schedules, time, knowledge, skill and financial resources to plan, shop for and prepare food. In spite of these obstacles, almost half (47 percent) of consumers report eating dinner with everyone in their household every night of the week—81 percent of U.S. households say home is the most popular location for eating dinner.¹ Although participation in family mealtimes declines as children age and represents less than 2 hours of family time a week, no other daily family activity is practiced with such regularity.² Key ‘ingredients’ for a high-quality meal include positive atmosphere, making mealtime a priority, conversation, laughter, relaxation and being together while enjoying eating something everyone likes.³

Developmental Achievements, Nutritional Health and Family Mealtimes

Since food-acceptance patterns develop early, remain relatively stable and are reflected in food choices later in life, childhood is a particularly

important time for developing healthy eating habits.⁴ By the age of 3 or 4 years, children’s eating is influenced by responsiveness to a variety of cues about food intake. The effects of the home socio-economic/cultural eating environment, the greater external physical environment (food availability/accessibility, food marketing) and policy influences (community, schools, public health programs/support) on family food choices have been associated with child health and well-being in some of the following ways:²

- Increased opportunities for enriched language and academic achievement
- Fewer behavior problems
- Greater amount of sleep
- Fewer eating disorders in preteens
- Reduced risk for obesity
- Improved nutrient intake

A meta-analysis focusing on the effects of family meals on nutritional health and eating habits found that children and adolescents sharing three or more family meals per week were more likely to be in a normal weight range, have healthier dietary and eating patterns and less disordered eating compared to children eating one or fewer family meals.⁵ Frequency of eating meals as a family is positively associated with intake of fruit, vegetables, grains, calcium-rich foods, protein, iron,

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REFERENCES

¹ NPD Dinnertime MealScapeStudy http://www.npd.com/press/releases/press_100315.html.

² Fiese BH, and Schwartz M. *Social Policy Report 2008*; Vol XXII, No. IV. Society for Research in Child Development.

³ Barilla Share the Table Survey www.ShareTheTable.com.

⁴ Patrick H, and Nicklas TA. *J Am Coll Nutr* 2005; 24:83-92.

⁵ Hammons AJ and Fiese BH. *Pediatrics*, 2011; 127:1565-1574. www.pediatrics.org/cgi/doi/10.1542/peds.2010-1440.

⁶ McIntosh A. et al. *J Nutr Educ Behav*. 2011; 43:142-149.

folate, fiber, vitamins A, C, E and B6 and negatively associated with soft drink consumption.⁴ In addition, cooking and eating at home more often, preferably as a family, is a key consumer behavior endorsed in the *Dietary Guidelines for Americans, 2010*.

Mealtime Structure

Research suggests that mealtime structure (collaboration vs. control), expectations (rules and clear boundaries) and responsive parents/caregivers greatly influence children’s eating patterns. Parenting styles have been described as:

- **Authoritarian:** Disciplinarian with little regard for the child’s choice
- **Permissive:** Indulgent without discipline, little structure and choices limited by what is available
- **Neglectful:** Without rules and emotionally uninvolved
- **Authoritative:** Respect for child’s opinions but with clear boundaries

Children in families with authoritarian, permissive or neglectful parenting styles were found to be at greater risk for overweight compared to children with more authoritative parents.⁶ Children told to “clean their plate” (an authoritarian approach) were less sensitive to satiety cues and were more fixed on restricted “forbidden foods” even when full.⁴ Permissive feeding has been associated with drinking less milk and lower intake of all nutrients except fat. Authoritative feeding has been associated with greater fruit and vegetable availability and intake and lower intake of foods of lower nutrient quality.⁴ With authoritative feeding, the child is encouraged to eat healthy foods but is also given some choices—adults determine which

foods are offered, and children determine which are eaten. The Sidebar illustrates this division of responsibility.

Monitoring, Mentoring and Modeling

Research also has identified activities, behaviors and communications (ABCs) of family mealtimes across developmental periods from under 1 to 16 years of age. The “ABCs” for parents of young children include:²

- **Activities:** Turn off television. Introduce finger foods for young children. Include children in shopping and preparing food (age-appropriate).
- **Behavior:** Set a regular mealtime. Expect good manners. Mealtimes last around 15–20 minutes.
- **Communication:** Talk about what happened in the neighborhood. Talk about what happened in school.

Modeling parental dietary behaviors by children is key to their developing food preferences and behaviors. One study found that fathers who believe that dinner is an important family gathering might help lower children’s use of fast food.⁶

Sidebar: Division of Responsibility	
Parent/Adult —Responsible for what, where, when	Children —Responsible for whether and how much to eat
Choose and prepare foods	Children will eat
Provide regular meals/snacks	They will eat the amount they need
Make eating times pleasant	They will learn to eat the food their parents eat
Show children what they have to learn about food and mealtime behavior	They will grow predictably
Do not let children graze for food/beverages between meal/snack time	They will learn to behave well at the table
Let children grow up to get bodies that are right for them	

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Practice Points for Health Professionals: Resources

Families and home environments differ, necessitating customized approaches to family mealtime solutions. Health professionals can assist parents in setting realistic goals, reinforcing the benefits of family meals and encouraging parents to take advantage of the many initiatives and resources to promote family mealtime.

- Kids Eat Right. American Dietetic Association and Foundation – <http://www.eatright.org/foundation/kidseatright/>.
- Let’s Move campaign. Launched by the First Lady – <http://www.letsmove.gov/>.
- Making Meals Matter for Your School-Aged Child – <http://www.dairycouncilofca.org/HealthProfessionals/ClientPrograms/ProgramMealsMatterSchoolAge.aspx>
- Keep the Beat Recipes: Deliciously Healthy Family Meals – http://hp2010.nhlbihin.net/healthyeating/pdfs/KTB_Family_Cookbook_2010.pdf.
- Parent Helpers: Cooking With Kids – Part of the PBS Parent Series <http://www.pbs.org/parents/parenthelpers/cooking.html>.
- Meals Matter. Dairy Council of California – <http://www.mealsmatter.org/>.

INTERVIEW

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Q. What are some basic tips to help parents/caregivers address common mealtime challenges?

A. An essential aspect of parenting is to treat meals as priority time for children. Family meals are not just a time to eat—what families talk about with each other seems to be important to teach and share tasks, values, traditions and memories from birth onward. Yes, family meals are linked to better food intake, but other social and educational benefits accrue when family meals are a priority and enjoyed in a positive, structured, supportive environment.

When food looks appealing—and children are involved in choosing and preparing—they will eat it. I encourage parents/caregivers to include children in the entire process of getting, and enjoying, the food on the table—gardening, visiting a farmer’s market, selecting a new fruit or vegetable at the supermarket—and cooking tasks, even very simple ones for young children.

Other tips include:

- Mealtime often goes off track when too much focus is on the food or nutrition. When the focus is on sharing time together, food fights tend to diminish.
- Setting the tone for a positive environment can be as simple as a colorful table using size- and age-appropriate utensils. Children’s plates that are already in sections help remind parents of the different food groups illustrated in the colorful MyPlate icon.
- Parents can encourage engaging conversation—when involvement is good, no one will mind that the table is a tech-free zone. I’m very much a techie but believe mealtime is a special time for families to pay attention to each other rather than their devices.
- By adhering to the adult/child division of responsibility (see Sidebar), families establish limitations and natural consequences. Should a child choose not to eat what is offered, there is no expectation that parents assume the role of short-order cooks, jump up and cook something else.

Q. What suggestions do you have if health professionals experience ‘backlash/pushback’ when discussing the benefits of family meals with parents who might not have experience in—or positive memories of—mealtimes?

A. It is understandable that parents/caregivers who haven’t participated in regular (or positive) family mealtimes may feel unsure to try something that they haven’t experienced. Yet, nearly everyone can identify a meal that was important at some time—at the home of an extended family member; a holiday gathering; or meals enjoyed socially, eating out with friends. Helping parents bridge the memory of that social/cultural experience can inspire and give them confidence to create a pleasant environment for their children. It is important to focus first on the gathering, because mealtimes are more than providing nutrients.

It is also understandable that parents wonder whether what they are doing is working—whether a child will learn to read his or her own signals for satiety and food selection. My advice is that children can and will learn when these habits are modeled for them. Children watch most everything parents do—including what parents do around food and meals. When parents prepare and enjoy a variety of nutrient-rich foods and stop eating when they are full, they help establish patterns for children to follow. Consistency is important in modeling, so I encourage parents to use common sense and strive for balance over time rather than expecting every meal to be picture-perfect. If a child wants dessert, parents can improve the nutrient quality by serving it with a glass of milk or fruit.

Q. How can health professionals support healthy eating practices in the school environment?

A. In response to the childhood obesity issue, there are increasing efforts to control the meal setting, particularly related to calories, fat, sodium and sugar. Opinions vary on this approach. As noted, authoritarian/restrictive approaches can result in fixation on forbidden foods. Whether working with policy makers or parents, health professionals can shift the focus to the importance of learning HOW to eat versus too much focus on specific food components. When introducing the MyPlate icon to replace MyPyramid, Secretary of Agriculture Vilsack commented: “We are not telling people what to eat; we are giving them a guide.” Health professionals should consider MyPlate a blank plate/slate and an opportunity to communicate the concept and benefit of balanced eating over time, regardless of the setting—home or away from home.



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