Parenting practices toward food and children’s behavior: Eating away from home versus at home

Michelle Kasparian, M.S. a,1, Georgianna Mann, PhD. a,*, 2, Elena L. Serrano, PhD. b, Alisha R. Farris, PhD., R.D. c, 3

a 338 Wallace Hall, Department of Human Nutrition, Foods, and Exercise, Virginia Tech, Blacksburg, VA 24061, USA
b 327 Wallace Hall, Department of Human Nutrition, Foods, and Exercise, Virginia Tech, Blacksburg, VA 24061, USA
c 333 Wallace Hall, Department of Human Nutrition, Foods, and Exercise, Virginia Tech, Blacksburg, VA 24061, USA

ABSTRACT

Parenting style influences a child’s overall diet quality and establishes food preferences. Parenting style and “food rules” for children differ by eating at home or away from home. Eating meals away from home is increasing despite associations with consumption of unhealthy foods and higher weight status. The objective of the current study was to compare parenting practices and decision-making at restaurants versus at home. A mixed methods approach was utilized: facilitated, individual interviews to explore decision-making and parenting practices; written questionnaires for socio-demographic information; and body mass index. Summaries and emergent themes were generated based on examination of tapes and transcripts. Descriptive statistics were computed for questionnaire data. Twenty-five mothers of children of five to eight years who ate at restaurants at least two times per week participated. Mothers reported more permissive food rules at restaurants yet maintained higher behavioral expectations. Mothers were also more likely to make decisions about whether they eat out, where to eat, and children’s meal selections than their children. The findings suggest that parenting practices toward overall behavior and food choices may differ at restaurants than at home, highlighting the importance of healthy menu options, further research, and educational strategies.

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1. Introduction

Parenting style, or attitudes and beliefs that create an emotional climate for parent-child interactions, is a key determinant of children’s weight status and overall attitudes, beliefs, and behaviors toward diet and food (Darling & Steinberg, 1993; Johannsen, Johannsen, & Specker, 2006; Savage, Fisher, & Birch, 2007; Ventura & Birch, 2008). Parenting style is usually classified as authoritative (high demandingness/high warmth), authoritarian (high demandingness/low warmth), or permissive (low demandingness/high warmth) (Baumrind, 1966). Other classifications of feeding practices include overt and covert control, where the former is described as control exhibited by parents that the child can detect while the latter, the child cannot detect (Ogden, Reynolds, & Smith, 2006). While parents have a general predominant parenting style, actual parenting practices, behaviors, or strategies may vary depending on context.

Authoritative parenting, which promotes overall dietary quality and protects against childhood obesity, involves shared decision-making, reasoning, and offering praise for positive food behaviors (Berge, Wall, Loth, & Neumark-Sztainer, 2010; Ogden et al., 2006; Hughes, Power, Orlet Fisher, Mueller, & Nicklas, 2005). Most studies examining food parenting style have been quantitative and focused on specific feeding practices, such as pressure to eat, covert/over control, restriction, and availability/modeling, and/or specific dietary behaviors, such as consuming sugar-sweetened beverages, dietary fat, and fruits and vegetables (Lopez et al., 2012; Van der
Horst et al., 2007; Ventura & Birch, 2008; Vereecken, Legiest, De Bourdeaudhuij, & Maes, 2012). Parental feeding practices are often a combination of a number of strategies which can vary based on a number of factors including parent age, ethnicity, and child gender (Brown, Ogden, Vögele, & Gibson, 2008).

However, this literature has not considered how food parenting may differ between environmental settings, such as at a restaurant versus at home. Some research has been done regarding child food behaviors such as meal skipping and over consumption in both in and outside of the home, yet parenting styles away from home are largely understudied (Dammann & Smith, 2010).

Understanding the differences in food parenting style by environmental setting has important health implications. Eating away from home has been linked with higher consumption of energy, sugar-sweetened beverages, fat, sugar, sodium and protein, and higher weight status among children (Bowman, Gortmaker, Ebbeling, Pereira, & Ludwig, 2004; Larson, Neumark-Sztainer, Laska, & Story, 2011; Powell & Nguyen, 2013; Sonneville et al., 2005). Approximately 34% of children and adolescents eat fast food on a given day and consumers spend more of their income on dining out than grocery shopping (Fleming, 2015; Vikraman, Fryar, & Ogden, 2015).

Given the contextual nature of parenting practices, it is important to explore how environment setting (i.e. restaurants) and specific parenting behaviors, particularly related to diet and nutrition, may interact. The goal of this study was to qualitatively obtain further insight into how food parenting practices might differ when eating away from home versus at home.

2. Material and methods

2.1. Study sample

Mothers of children, ages 5–8 years old, within [blinded location], a large town with a population of 43,985 residents, using purposive and snowball sampling (U.S. Census Bureau). Mothers are generally considered the nutrition gatekeepers, responsible for family food choices, decisions, and rules (Johannsen et al., 2006). Children in this age range are young enough to engage in shared decision-making without expecting complete autonomy, particularly around food.

Recruitment materials were posted in local community centers, libraries, childcare centers, and gyms. Advertisements were listed in the local newspaper and a listserv targeted toward parents in the area. Eighty-one percent of residents report being white, 4.3% black, and 3.5% Hispanic/Latino (U.S. Census Bureau). All participants provided informed consent prior to participation. All procedures and protocol were reviewed and approved by [blinded] Institutional Review Board.

2.2. Eligibility

Participants were eligible if they ate at a restaurant with their children at least two times per week and if the children did not have dietary restrictions. A minimum of two times per week was assigned as previous studies demonstrate this frequency’s association with adverse health outcomes, including weight status (Duffey, Gordon-Larsen, Steffen, Jacobs, & Popkin, 2009).

2.3. Facilitated, semi-structured interviews

Baumrind’s parenting typology was used as the primary theoretical foundation for the study, in addition to dimensions of Social Cognitive Theory that posits that an individual’s (i.e. child) behaviors are reciprocally determined by a person’s preferences and environment (i.e. parents), focusing on parental behavior, control, and expectations (Baumrind, 1966; Bandura, 1986). Correspondingly, the assumption was that parents’ overall parenting styles and practices directly and indirectly influence children’s attitudes and behaviors.

After a literature review, the interview script and questionnaire were created, reviewed and pilot-tested by the research team, consisting of expert researchers in nutrition, public health, psychology (parent-child dynamics), and marketing (decision-making). The interview script and questionnaire were pilot-tested with a small number of mothers for content validity and to allow for interviewer practice prior to data collection. The interview script included questions about overall parenting philosophy (not specific to food), food parenting policies and practices at home and restaurants, and decision-making on restaurant choice and food/beverage selection. Interviews were conducted by a trained interviewer in a private location, and were recorded using digital audio recorders with field notes. Questions included: “Describe your parenting style or your parenting philosophy;” “What are some general food rules that you have at home for your child;” “What types of rules do you have when eating away at restaurants;” and “How does your child influence your decision to go out to eat.” Participants were also asked to complete a short activity as part of the interview, whereby they were given several small slips of paper with various restaurant logos and asked to organize them in order of preference when going out to eat as a family.

2.4. Questionnaire

The 49-item questionnaire included questions about: socio-demographic information (age, number of children, and race/ethnicity); frequency of eating away from home; physical activity of child; child’s health; and parenting style, based on the Parenting Styles and Dimensions Questionnaire (Robinson, Mandelco, Olsen, & Hart, 2001; Robinson, Mandleco, Olsen, & Hart, 1995). The Parenting Styles and Dimensions Questionnaire results were previously tested for internal consistency reliability using 1251 parents and achieved an acceptable Cronbach’s z of 0.62 (Robinson, Mandleco, Roper, & Hart, 1995). Means (and standard deviations) for each domain were 5.18 (+/0.75) for authoritative, 2.44 (+1.33) authoritarian, and 3.54 (+1.13) for permissive, based on a scale of 1–6 with 1 being “never” and 6 being “always.”

2.5. Weight status

Height and weight were collected to calculate participant body mass index (BMI) using the Tanita™ electronic BWB-800 scale and Seca™ 217 portable stadiometer. Participants were asked to remove their shoes to maintain accurate measurements.

2.6. Data analysis

Interview data were transcribed verbatim manually and verified for accuracy using the field notes. A thematic approach was used to analyze the qualitative data collected during interviews (Creswell, 2007; Lindseth, 2004; Patton, 2002). Coding was done by two independent researchers consisting of both preset coding based upon the interview questions and new coding as the analysis proceeded. Summaries and emergent themes were generated, using the interview guide as the framework and comparisons made between parenting practices at home and away from home. Major and minor themes were identified with consensus between the two coders (Strauss, 1987). All interview data were imported and coded using NVivo software (QSR NVivo 9.2, Cambridge, MA, 2011).

Descriptive statistics were entered into Microsoft Excel software.
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