



Parents, Child Eating & Weight

Dr Leah Brennan

Clinical, Health, Educational & Developmental Psychologist

Senior Research Fellow

Centre for Obesity Research & Education

Monash University

leah.brennan@monash.edu

Child Health & Obesity

- **Child Weight Status (2007)**
 - 17% overweight, 6% obese
- **Nutrition (1995)**
 - 50% inadequate fruit intake,
 - 70% inadequate vegetable intake,
 - Only 17% adequate fruit and vegetable intake
 - > 50% of children excess fat and sugar
- **Physical Activity (2007)**
 - 69% adequate physical activity
 - 33% non-excessive screen time
 - **Obese least active**

Australian National Children's Nutrition and Physical Activity Survey (2007)

Australian National Nutrition Survey (1995)

Child Overweight & Obesity

- Rapid increase in prevalence of overweight & obesity
 - 35% predicted by 2025
- Rates are higher in:
 - Low income families
 - Indigenous children
 - Pacific Islander, Middle Eastern & Mediterranean populations

'Obesogenic' Environment

- Increased energy intake
- Reduced physical activity
- Increased sedentary time
- Culture of thinness & dieting
- Conflicting media messages

Golan & Crow, 2004; Golan, 2006;

Moroshko & Brennan 2011; Ventura & Birch, 2008



Opportunities for Parents

- Food availability & accessibility
- Meal structure & home eating patterns
- Nutritional knowledge
- Modelling of behaviours & attitudes
- Parenting styles & practices

Limitations

- **Mostly:**
 - Mothers & daughters
 - White, middle class families
 - “Food-secure” families
 - Cross-sectional
- **Methodological limitations**
 - Sample size
 - Validity of measures
 - Capacity identify individual contributions
 - Consideration of relationships

Food Availability & Accessibility

- Early & repeated exposure to variety of food
- Control
 - Food entering house
 - Method of food preparation
 - Frequency & choice of eating out & take-away
- Child food preference learned
- Choose to eat & prefer 'home' foods

Meal structure & Eating Patterns

- Parental participation in mealtimes
 - Positive atmosphere, family relationships
 - Model appropriate behaviours
- Family meals
 - Better food choices
 - Food choices deteriorate as participation in family meals reduces
- More independence poorer food choices
 - non-family meals, eating outside home, own money

Nutrition Knowledge

- Maternal nutritional knowledge & concern for disease prevention associated with child diet & weight

Parents as Role Models

- Eat foods they see adults eat
- Influenced by parents food behaviour
- Children
 - Timing & place of eating
 - Food choices - likes & dislikes
- Adult
 - Eating food from plate, finishing all food
 - Using food as an incentive or threat
 - Eating dessert
 - Eating regular meals & snacks

Parents as Role Models

- Mothers restraint & perceived child weight
 - Daughter eating pattern & weight
- Mothers communicate own body dissatisfaction
- Mothers disinhibition predicts daughters
 - Role modelling & feeding
- Fathers value of fat & thinness predict daughter body dissatisfaction & disordered eating

Parenting Food Practice

- Poorer eating habits themselves use more controlling feeding practices
 - Poorer diet
 - Insensitive & unresponsive to eating cues
 - Child less capacity to self-regulate

Parenting Styles

- Parental attitudes & styles of interacting with children - trait like
- Demandingness
 - behavioural control
 - maturity demands, supervision, disciplinary efforts & willingness to discipline
- Responsiveness
 - warmth, supportiveness
 - attuned, supportive & accepting of special needs

Parenting Styles

- **Authoritative**
 - High demandingness, high responsiveness
- **Authoritarian**
 - High demandingness, low responsiveness
- **Indulgent**
 - Low demandingness, high responsiveness
- **Neglectful**
 - Low demandingness, low responsiveness

Parenting Styles

- **General**
 - Limited research
 - Authoritative more helpful
- **Feeding specific**
 - Authoritative
 - Healthier food available in home
 - Healthier food consumption
 - More positive feeding practices

Parenting Practices

- Specific behavioural strategies employed by parents
- Goal specific
 - May differ across contexts, children etc.
- Includes;
 - Pressure to eat
 - Restriction
 - Using food as a reward, control
 - Modelling

Pressure to Eat

- Children perceived to be underweight
- Increases intake in setting
- Slower intake
- Lower intake outside setting
- Lower preference
- Poorer diet quality
- Higher child pickiness
- Higher child restraint & emotional disinhibition

Restriction

- Children perceived to be overweight
- Higher weight status & weight gain
- Increase preference
- Increased intake
- Eating in absence of hunger
- Eating disinhibition
- Negative self-evaluation re eating

Overt & Covert Restriction

- **Overt**
 - Child aware
 - Increases healthy food choices
- **Covert**
 - Child unaware
 - Reduces unhealthy food choices

Implications

- **Parents**
 - Can mediate effect of 'obesogenic' environment
 - Should be central agents of change
- **Intervention**
 - Non-restrictive
 - Self-regulation & responsiveness to internal cues
 - Parenting skills to facilitate healthy attitudes, interactions & lifestyle re eating, activity & body image

Parents – Agents of Change

- Source of authority
- Role model
- Mediate ‘obesogenic’ environment
- Promote self-regulation
- Promote healthy behaviours

- Less child resistance to change

Sole Agents of Change??

- Target parental knowledge & practices
- Shifts focus from weight to parenting
- Focus on health rather than weight
- Address obesity & eating disorders
- Limit children's capacity to 'out-manoeuvre' parents

Sole Agents of Change

- Integrated message, addresses spectrum of eating-related problems
- General parenting skills
- Parenting to prevent weight related problems
- Modelling of healthy lifestyle
- Promote healthy environment for child self-esteem
- Practice & model self-care
- Balance needs of child nurturance & limit setting
- Positive food practices to prevent weight related problems

Parental Cognition and Behavior

Environmental Change

Increase Nutritional Knowledge and Practice

Knowledge: healthful eating habits, portion size

Skills: purchase healthy foods, read food labels

Prepare healthy balanced foods and meals

Select lower fat, higher fiber foods

Select appropriate serving sizes

Respond to internal hunger and satiety cues

Practice the 5 onlys: *only in the dining room, only while sitting, only from a plate, only eating and only when hungry*

Eat slowly

Exercise regularly

Limit TV Viewing

Enhance Parenting Skills

Are empowered to develop skills and confidence

Perceive the problem as familial

Practice authoritative parenting style

Support child internal regulation

Improve basic general skills: *nurturance attitude, setting limits, being consistent & contingent, etc.*

Improve child-parent communication

Calm the child rather than judge

Provide effective reinforcements (*positive, nonfood*)

Promote problem solving & stress management

Provision of Healthy Environment

Provide a variety of healthy foods

Limit exposure to unhealthy foods

Reduce stimulus for over-eating

Practice regular meal & snack times

Provide a pleasant social context in which foods are presented, *companionship*

Establish designated times for family meals.

Allocate individual portions

Provide alternative leisure time

Create opportunity for physical activity

Limit sedentary activity

Encourage feeling expression

Emphasize the importance of fit and healthy bodies, rather than thinness.

Modelling

Change in child weight status

Sole Agents of Change

- Better weight loss & eating disorder outcomes
- Long term success;
 - Supportive, interactive family
 - Promote child responsibility & self-image,
 - Promote healthy lifestyle & awareness of hunger & satiety cues

Division of Responsibility

www.ellynsatter.com

- Parents provide
 - Structure, Support, Opportunities
- Children choose
 - How much? Whether?

to eat from what the parent provides
- Support from both obesity & eating disorders researchers & clinicians

Division of Responsibility in Feeding

- **Infants**
 - Parents responsible for what
 - Children responsible for how much (& everything else)
- Parents help infant to be calm & organised, feed smoothly, paying attention to babies cues re timing, tempo, frequency & amounts

Division of Responsibility in Feeding

- **Toddlers to adolescents**
 - Parents responsible for what, when, & where
 - Children responsible for whether & how much

Parent's feeding job

- Choose & prepare food
- Provide regular meals & snacks
- Make eating times pleasant
- Show children what they have to learn about food & mealtime behaviour
- Not let children graze between meals & snacks
- Let children grow into the bodies that are right for them

Children's eating jobs:

- Children will eat
- Will eat the amount they need
- Will learn to eat the food their parents eat
- Will grow predictably
- Will learn to behave well at the table
- Parents to trust children to do their job
- If parents do their jobs with feeding children will do their jobs with eating



Division of Responsibility in Feeding

www.elynsatter.com