

Parental Feeding Practices and Children's Eating Patterns – A Qualitative Review

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ABSTRACT

This review is to provide insight into the ways in which growing up in today's conditions of dietary abundance can promote patterns of food intake that contribute to accelerated weight gain and overweight, and to describe the factors that shape the development of children's food preferences and eating behaviors during the first years of life. In particular, we place an emphasis on characterizing the predispositions of youngsters as well as the feeding habits of parents toward their young children. We will see that the feeding practices that evolved throughout human history as effective parental responses to the threat of food scarcity can, when combined with the preferences and predispositions that infants are born with but have not yet learned, actually promote overeating and overweight in our current eating environments.

Keywords: Parental, Child

INTRODUCTION

During the initial years of a person's existence, eating patterns develop as a result of biological and behavioral processes that are geared toward satisfying the requirements for healthy growth and development. For the most duration of human history, a lack of food has posed a significant threat to the species' ability to continue existing. As a result of this threat, human eating behavior and traditions around the feeding of young children have developed over time. Infants are born into a wide variety of cultures and cuisines, and as a result, they come equipped as young omnivores with a set of behavioral predispositions that allow them to learn to accept the foods that are made available to them. These predispositions allow infants to learn to accept the foods that are made available to them. Historically, when resources were few, a significant portion of a family's life and resources were dedicated to the acquisition and preparation of foods, many of which were deficient in terms of calories, nutrients, and palatability. In stark contrast, in non-Third World nations children's eating habits are developing under settings that have never been seen before: conditions of unparalleled nutritional abundance, in which delicious, affordable, and ready-to-eat foods are widely available. The purpose of this review is to provide insight into the ways in which growing up in today's conditions of dietary abundance can promote patterns of food intake that contribute to accelerated weight gain and overweight, and to describe the factors that shape the development of children's food preferences and eating behaviors during the first years of life. In particular, we place an emphasis on characterizing the predispositions of youngsters as well as the feeding habits of parents toward their young children. We will see that the feeding practices that evolved throughout human history as effective parental responses to the threat of food scarcity can, when combined with the preferences and predispositions that infants are born with but have not yet learned, actually promote overeating and overweight in our current eating environments. This will be demonstrated in the following section. In addition

to the relatively recent changes in our eating environments, concurrent reductions in opportunities for physical activity undoubtedly also contribute to positive energy balance and obesity. However, the topic of these concurrent reductions in opportunities for physical activity is outside the scope of this article.

In addition to being a period of fast physical development and change, the first five years of a person's existence are also the years during which they adopt eating practices that might lay the groundwork for their future eating patterns. Children in their early years learn what to eat, when to eat it, and how much they should eat depending on the transmission of cultural and familial ideas, attitudes, and behaviors relating to food and eating from their parents and other family members. Throughout, we place an emphasis on how important it is for parents and other cares to have a part in the formation of young children's early experiences with food and eating, and we illustrate how these early experiences are connected to young children's eating behaviors and their weight status.

THE CURRENT EATING ENVIRONMENT

In today's world, one may purchase food and drink in virtually every location relevant to daily life. In the United States, as of the year 2002, there were a total of 514,085 restaurants and an additional 152,582 businesses where one could purchase food and drinks. In addition to that, there is now a wider availability of a wide variety of low-cost meals that are high in calories and that come in ever bigger quantities. The average supermarket in the United States offers 45,000 different products, and the amounts that customers are offered at restaurants and fast-food places are sometimes twice as large as the size that is advised by the USDA.

Women continue to have the primary task of providing food for their children in the majority of homes. The shifts in job patterns and the composition of families, on the other hand, mean that women have less time to dedicate to this activity. The percentage of moms with children younger than 18 who participated in the work force rose from 47 percent in 1975 to 71 percent in 2004. This rise occurred during the years 1975 and 2004. In addition to this, in sixty-one percent of two-parent households with children less than eighteen years old, both parents hold down paid employment. There is a 72 percent employment rate for single mothers who are raising their children alone. In addition, more mothers than fathers raise their children and provide for them without the support of a partner. Twenty-three percent of children under the age of eighteen live with their mother alone.

One of the repercussions of these tendencies is that young children are increasingly being fed on a regular basis by individuals who are not their parents. In point of fact, thirty-one percent of children of preschool age get childcare outside the house, which may include care at mealtimes from a grandmother or other relative, and forty-one percent of children of preschool age engage in organized childcare. In addition to this, households spend less time eating their meals together. Only about half of married parents (55%) and around 47% of single parents (47%) have breakfast every day with their preschool-aged child. In conclusion, a rising amount of the food that youngsters eat is prepared outside of the house and then eaten there. Approximately forty percent of a family's budget for food is now spent on purchasing meals outside the home. It is possible that children will be offered especially big amounts in these settings, causing them to consume more calories and fat than they would while dining at home. These developments, taken together, provide the impression that younger children in today's society eat less of their meals with their families and are more frequently exposed to big amounts of tasty, calorie-dense foods than younger children did in past generations.

REVIEW OF LITERATURE

Rachel L. Vollmer Purpose The purpose of this study is to determine whether or not the feeding styles of parents (the emotional atmosphere of the meal) regulate the association between food parenting practices (goal-directed actions) and children's preferences for fruit, vegetables, or high-fat/high-sugar meals. The findings of this study will be used to inform future research on this topic. Preparation and Operating Procedures: This was descriptive research that utilized a cross-sectional methodology, and 108 parents of children who were of preschool age took part in the study as participants. The parents filled various questions. We used linear regressions to investigate the connection between food parenting practices and children's food preferences, taking into consideration the moderating influence that feeding style has on the relationship. For the sake of this investigation, the authoritative feeding style was chosen to serve as a point of reference. Results It has been demonstrated that the way in which parents feed their children can modulate the association between particular food parenting practices and the food preferences of their children. Children have a significant decrease in preference for vegetables when their parents are either indulgent (low demands, responds to child's needs), authoritarian (high demands, does not respond to child's needs), or uninvolved (low demands, does not respond to child's needs) when it comes to providing a healthy food environment. Indulgent parents allow children to control their own eating, while authoritarian parents place high demands on their children but do not respond to their needs.

Authoritarian parents provide This is in contrast to children whose parents have an authoritative feeding style, which involves placing strong demands on the kid while still meeting their requirements. There were occasions when the authoritative tone was not as attractive as one may have liked. For instance, children whose parents did not take an active role in their upbringing and who were given food as a reward preferred vegetables to a much greater extent than children whose parents had an authoritarian feeding style and who were also given food as a reward. Both groups of children were given food as a reward. In addition, as compared to children of authoritative parents, children whose authoritarian parents set a good example for healthy eating by eating healthy themselves had a significantly reduced desire for items that included a high concentration of sugar and/or fat. Implications for Day-to-Day Activities When discussing the quality of the child's nutrition with the parents, pediatric nurses should educate the parents not only on food parenting techniques and feeding style, but also on the emotional climate of the meal. This is because the emotional climate of the meal can affect the child's ability to eat. This is because youngsters are exposed to both of these during the interactions that take place at mealtimes. In addition, it may be useful for educational programs to modify therapies based upon the eating pattern of the parent in order to maximize the success of the programs.

Edith Y. Kim-Herrera is the one responsible for writing this In later stages of development, an individual's nutritional condition is impacted not only by ways of complementary feeding but also by eating habits that coincide with those of the parents. The findings on the relationship between these elements and the development of newborns continue to be contradictory, and there is a shortage of research being conducted in this area in Mexico. (1) To identify complementary feeding practises and parental feeding styles; and (2) to investigate the relationship between complementary feeding practises, parental feeding styles, and child development at 6 and 9 months of age. These are the outcomes that are desired from the research. Methods: The information was collected from a made-up birth cohort that took place in Mexico. Anthropometric data was gathered from between 263 and 234 mother-child pairs for the purpose of conducting analyses on parental feeding approaches, complementary feeding practises, and other related topics (infants aged 6 and 9 months, respectively). Logistic

and linear regression models were utilised so that the relationships that did exist between the variables could be determined.

RESEARCH METHODOLOGY

SUBJECTS AND METHODS

Study design

In this study, we utilised a quasi-experimental approach to investigate the eating patterns of children before, during, and after they were denied access to a snack item for a period of five weeks. Both the children's meal choices and the amount of food they consumed were evaluated three weeks before and three weeks after the time of restriction. In addition, the behavioural reaction of children was evaluated both before and after they were given restricted access to a snack item for a period of five weeks. Each kid's access to a target food was restricted, while at the same time, each child was given unrestricted access to a control food. This was a component that was employed within each topic. The youngsters showed neither a strong preference for nor a strong aversion to the experimental items, which were two varieties of fruit bar cookies (apple and peach) that are often consumed. Two extremely comparable variants of the same kind of food were chosen so that the children's responses to limitation could be ascribed to the variations in the availability schedule. This was done so that the researchers could compare the children's responses. The youngsters were randomly assigned to receive either one of the two types of limited foods, and there was an even distribution of individuals between the two categories of food.

Subjects

Children aged three to five years old who were enrolled in childcare programmes offered by The Pennsylvania State University Child Development Laboratory were included in the study, along with the children's parents. We made sure to have each child's parents' signed permission before they could participate. A total of 38 students from two different classrooms were assessed to determine their eligibility for participation in the research. One of the children declined to take part in the experiment, another kid was too young to finish the steps, and five of the children were not present for the majority of the experimental evaluations and trials. The information on 31 youngsters, including 21 boys and 10 girls, was used for the analysis. The children's weight-for-height percentiles revealed a normal-weight sample ($-x$ SD: 59.5 4.3; range: 10.5–110.0). The children's mean age was 5 years and 0.12 months (range: 4–6 years), and their age was measured in years. The Institutional Review Board of The Pennsylvania State University looked over and gave its approval to each and every operation.

Measures

Evaluation based on a ranking of preferences. The meals to be used in the experiment were chosen through the use of a method that has been demonstrated to produce accurate and trustworthy data on the dietary preferences of youngsters. During the children's regularly scheduled snack time, an employee with the appropriate level of training conducted individual interviews with each child. Children sampled little amounts of meals and then classified them into one of three categories based on their overall impressions. The categories were portrayed with cartoon faces that said "yummy," "yucky," and "just alright." After this, rank-order scores were awarded to the items in each category as they were consecutively determined to be the "yummiest," at

which point they were removed from the selection. A variety of snacks, including cheese crackers, chive crackers, peanut butter crackers, peanut butter granola bars, chocolate chip granola bars, apple bar cookies, peach bar cookies, and strawberry bar cookies, were utilised in this process. Scores might vary anywhere from one to eight, with lower scores indicating a greater degree of affinity for the meals. Apple bar cookies and peach bar cookies, both of which were rated as having a neutral preference among tasters, were chosen to serve as the test and control snacks, respectively. There was no initial difference in preference score based on the type of fruit bar cookies (apple, 4.9 0.41; peach, 4.9 0.40) or the group assignment (control, 5.2 0.4; target, 4.6 0.4) prior to the period of restriction. Apple fruit bar cookies had a 4.9 0.41 preference score, while peach fruit bar cookies had a 4.9 0.40 preference score.

Independent measurements taken outside of the confined context: selection based on a forced option. Before and after the limitation, children were given a test called a forced-choice test to determine which items they preferred to eat out of the control group and the target group. During one of the regularly scheduled activities, a well-known interviewer spoke with each youngster individually for a few minutes. The youngster was given two distinct but identical containers, each containing an equal amount of the test and experimental meals (target and control, respectively). After then, the question of "which meal would you prefer for a snack" was posed to the kid. When the target food was selected, the participant received a score of 1, and when the control food was selected, the participant received a score of 0.

DATA ANALYSIS AND RESULT

EXPERIMENTS

Indicators Within The Restricted Setting: Behavioral Observations

When the 2-choice consumption test was employed as the baseline observational period, there were no early differences in reactions to the target and control meals that were detected. When the children's behavioral reactions to the target and control meals were compared to the periods before and during restriction, Figure 1 demonstrates that there was a time, three food type interaction that took place in the children's responses. There was a correlation between limiting children's access to the target food and an increase in the behavioral reaction to that food in comparison to the response to the control food.

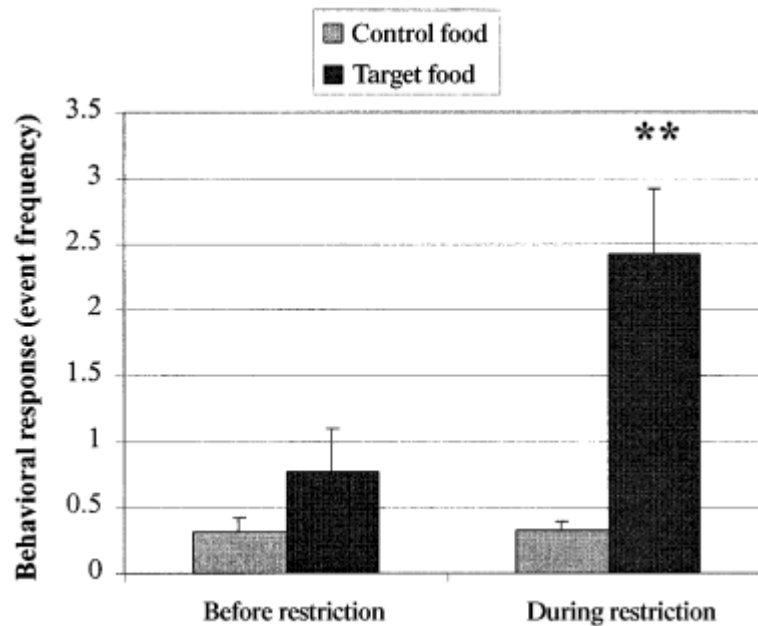


Figure 1 Children's mean (\pm SD) behavioral response (frequency of positive and negative events such as requests for the food, attempts to obtain it, or comments about liking it, per child) during 20-min experimental trials conducted before and during the 5-wk period of restricted access to the target food (n = 31). **Significantly different from control food, $P < 0.01$.

That is to say, in comparison to a comparable item that was easily accessible, the food that was restricted resulted in a greater number of favourable comments about it, a greater number of requests for it, and a greater number of attempts to get it. During the period of limitation, the enhanced reaction measured in comparison to the control meal was shown to be stronger in males than in females (time 3 food type 3 child sex, $P 0.05$).

Measures Outside The Restricted Setting: Pre- And Postrestriction Food Selection And Intake

In contrast to the obvious effects of restriction that were observed during the time when children's access to the food in question was restricted, measurements taken three weeks before and three weeks after the experimental trials revealed that there was no significant effect of restriction on children's intake or selection of foods. In addition, we did not find any evidence that the type of food consumed had a substantial impact on children's consumption. It was shown that children's intake of both the target meal (49.4 6.0 compared with 45.0 6.4 g) and the control food (51.5 5.8 compared with 38.5 4.7 g) reduced over time ($P 0.05$), which indicated a primary influence of time. In addition, there was found to be no significant difference between the proportion of children who chose the target meal as a snack before to the implementation of the limitation and the percentage of children who chose it after the implementation of the restriction.

EXPERIMENT

Table 4.1 presents some descriptive statistics for your perusal. The group comprised of adults who were of a normal weight and had dietary constraint and disinhibition scores that were within the usual range on average. The effect of limitation on behavioural reaction to, as well as selection and consumption of, the meal that was restricted. The primary objective of this research was to examine the effects of restriction on children's selection and intake of and behavioural response to a palatable food. This was accomplished by examining the responses

of the children both before and during a period of restricted access lasting five minutes. As can be seen in Figure 4.2, one of the primary effects of restriction was the modification of children's behavioural responses to the limited meal. It was shown that children's natural behavioural response to a pleasant snack item, measured as the frequency of positive and negative remarks and actions, was stronger during limited sessions than it was during unrestricted sessions. This impact did not alter in any way depending on the child's age or gender ($P = 0.16$ and $P = 0.66$ respectively). However, an interaction was shown to exist between the kind of limited food that was allocated and the session type ($P 0.001$); increases in children's behavioural reactions were reported for both foods, with stronger responses for pretzel fish-shaped crackers than for cheese fish-shaped crackers. A primary effect of restriction on children's selection of the restricted food is also shown in Figure 4.2, with a higher selection occurring during restricted snack periods as compared to unrestricted snack periods. Figure 4.2 was created using data from a study that was conducted in the United Kingdom. This impact was the same regardless of the experimental meal that was utilised ($P = 0.39$), the age of the kid ($P = 0.65$), or the child's gender ($P = 0.16$). There was also a significant main impact of session type on the amount of the limited food that the children consumed. The children consumed more of the restricted food during the restricted snack sessions as opposed to the unrestricted session types. This impact was the same regardless of the experimental meal that was utilised ($P = 0.34$), the age of the kid ($P = 0.27$), or the child's gender ($P = 0.79$).

CONCLUSION

Because young children are reliant on their parents and other carers for food, the decisions that parents make on how their children are fed are among the most important factors in determining the children's eating experiences. These choices include when eating will take place, the extent to which feeding takes place in response to children's indication of hunger or distress, the contexts within which eating will take place, the foods and portion sizes that will be made available to children, and the types of feeding practises that will be used to either encourage or discourage children's eating. All of these options have the ability to affect the early learning that children have about food and eating from a young age. Therefore, parents have an effect on their children through moulding the circumstances in which their children consume, but this impact works in both directions since parenting is, in part, a response to the traits of the kid. When analysing information derived from observational or cross-sectional research, it is especially important to keep this fact in mind. It is essential to have a comprehensive grasp of the elements that influence parenting and feeding in order to have any chance of successfully positively influencing the eating and weight outcomes of children. The present body of research indicates that there are numerous modifiable risk factors for childhood obesity that lie in the home contexts of early children. This is important information for those who are working to successfully prevent obesity in children.

However, this evidence alone is not sufficient to answer the question "does parenting influence child weight." The majority of the studies that address the association between parenting and child weight are cross-sectional, do not include measures of child eating, and cannot provide evidence for a causal relationship. The preponderance of evidence examining associations between parenting, child eating, and child weight provides support for associations between parenting practises and child weight. Given that interactions between parents and children are characterised by bidirectional impacts, the question of the direction of influence is an especially significant problem within this body of research. In the absence of conclusive evidence that parenting has a causal effect on child weight through an influence on child eating, evidence from the general parenting literature, which shows that parenting is responsive to and influenced by child characteristics and behaviors,

suggests that any direct association seen between parenting and child weight is in the other direction, with child weight influencing parenting. This is because the general parenting literature shows that parenting is responsive to and influenced by child characteristics and behaviors.

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