jrc Journal of Research for Consumers

Issue: 18, 2010

Children's Family Dinner Experiences and Attitudes

AUTHOR(S): Melanie Pescud and Simone Pettigrew

ABSTRACT

Overweight and obesity are a major problem affecting children in many countries. The practice of sharing regular family meals has been shown to improve children's diets and eating habits, which in turn can have favourable outcomes for children's weight status. This study explored children's family mealtime attitudes and experiences to identify themes that may be effective in encouraging families to have regular family meals. Most of the children showed a strong preference to eat together as a family. They reported usually enjoying the interaction with their parents and other family members that occurred during mealtimes. Among the minority who reported that they didn't enjoy family meals, conflict with siblings and parents was a common explanation. The study findings can inform the development of social marketing campaigns aiming to improve children's diets and eating behaviours in an effort to prevent and address child obesity.

ARTICLE

Introduction

Child overweight and obesity in Australia is a serious public health problem. Unhealthy food choices and eating patterns are recognised as significant contributors to increases in children's weights. There is a positive association between family meals spent together and better dietary choices, illustrating that family meals play an important role in children's diets. Compared with families who do not regularly eat together, families who eat together are less likely to consume carbonated drinks and fried foods, and more likely to consume healthier foods, including fruits, vegetables, and grains. The positive effects of sharing meals have been largely attributed to opportunities for parental modelling of healthy eating. This suggests the relevance of Social Learning Theory, which explains the function of observational learning in the context of eating habits. It has been also suggested that family meals can positively contribute to the psychosocial development of children. For example, regular participation in family meals is associated with a lower incidence of eating disorders and better coping skills later in life.

Despite the nutritional and psychosocial benefits associated with family meals, in the past two decades the frequency of family meals in Westernised countries has declined. This suggests a need for social marketing interventions aimed at encouraging parents to facilitate more regular family meals. However, there is very little research on the mechanisms by which children obtain psychosocial benefits from family meals and the strategies that may be employed to encourage

parents and children to eat together more often to take advantage of such benefits. Most existing research relating to barriers to family meals has focused on factors impacting on parents rather than those impacting on children.

Children's attitudes to eating as a family are likely to influence parents' motivation to organise family meals. Previous obesity interventions have found that where a group involved in an intervention lacks motivation to participate, this constitutes a substantial barrier to intervention effectiveness (Barlow and Dietz, 2002; Story *et al.,* 2002). Any efforts in this regard will thus need to consider children's reactions and how they can be optimised. The present study explored children's family mealtime attitudes and experiences to inform future interventions focusing on this practice.

Method

Children from two Perth metropolitan schools (one low and one medium socioeconomic status (SES)) were surveyed on a range of issues pertaining to child health. The children were aged seven to 10 and in Years 3 to 5 in primary school. School SES was based on the Australian Bureau of Statistics' Socio-Economic Indexes for Areas. Included in the survey were two open-ended questions relating to children's family mealtime attitudes and experiences. The answers provided to these two questions are the focus of this article. Children were asked, 'What do you like about eating dinner together as a family?' and 'What don't you like about eating dinner together as a family?' Table 1 provides the sample description. All responses were entered in NVivo7 and coded to 40 nodes. The content of these nodes ranged from demographic information to conceptual issues such as social interaction and family conflict.

Table 1. Sample Description

School SES	**Low SES**	**Medium SES**	**Total**
Children	79	118	197
Year 3	24	28	52
Year 4	32	40	72
Year 5	23	50	73
Girls	38	53	91
Boys	41	65	106

Findings

The findings presented in this paper are only for those children who responded to at least one of the two questions (n= 175 children: 89%). Reflecting the children's ages and literacy levels, most responses were brief. However, the large number of responses permitted a comprehensive thematic analysis of the data. The primary themes identified are outlined below.

Positive Aspects of Family Meals

In relation to the question, "What do you like about eating dinner together as a family?", responses fell into two main categories: social interaction and family unity.

Social interaction

Most of the children seemed to enjoy the social aspects of eating together as a family. In general, they described family meals as pleasurable occasions and part of the day they looked forward to. Three aspects of social interaction appeared to be particularly important: (1) being able to share with their family members the best and worst parts of their day, (2) having 'quality' access to their parents, and (3) obtaining assistance for any problems they may be experiencing at the time.

In terms of sharing information about their day, the children often described dinner-time conversations as a form of debriefing whereby family members updated each other on the important happenings in their lives. The children expressed appreciation for being able to talk about their days, both in general and, more specifically, about school. Some also liked hearing stories about their parents' pasts when they were growing up. In addition, conversations at the dinner table provided families with the opportunity to share stories and jokes, and essentially enjoy each others' company.

> *We chat, play eye spy, and sometimes tell jokes (girl, 10).*
> *We talk about what we did at school (boy, 8).*
> *My dad talks about what he used to get up to when he was my age and my brother's age (girl, 10).*

By being able to share in conversations at the dinner table, children were able to receive their parents' focused attention. For some children this was particularly important because of little access at other times.

> *I can talk to mum and tell her what I did today (girl, 10).*
> *It is the only time I get to see my dad (boy, 10).*

Access to parents also translated into an opportunity for sharing problems and having broad-ranging discussions. This seemed to be especially important for the girls.

> *We can have a discussion (girl, 9).*
> *We get to talk about problems and stuff (girl, 9).*

Family unity

Many children mentioned that they felt safe and at ease when they ate dinner with their family. For these children, dinner times were happy and peaceful occasions that allowed them to feel part of the family unit and therefore safe and protected.

> *To be safe and to be happy (boy, 10).*
> *It makes us welcome (boy, 8).*
> *It makes me feel like I've got a family (girl, 9).*
> *I don't feel alone (girl, 8).*

Negative Aspects of Family Meals

In relation to the question, "What don't you like about eating dinner together as a family?", most of the children stated 'nothing' in response, indicating that family mealtimes were, for the most part, enjoyable experiences. Some children, however, found mealtimes unpleasant for a range of reasons. Negative responses fell into three main categories: conflict, discomfort, and segregation.

Conflict

Some children reported that having to eat dinner with their siblings was a constant source of conflict. Brothers and sisters would sometimes tease one another, hit each other, and 'dob' to their parents.

> *Sometimes my sisters annoy me and then I annoy them back and I get in trouble (boy, 10).*
> *My brothers fight (girl, 8).*
> *My brother hits my sister and I (boy, 9).*

Unfortunately, bad behaviour did not appear to be limited to the children. Some of the respondents reported that their parents engaged in behaviours that they considered inappropriate. In particular, witnessing their parents argue at the dinner table was upsetting for some children. They interpreted this behaviour as indicating that their parents did not like one another. This theme therefore represents the counterpoint to the family unity theme described above.

> *My parents don't like each other (boy, 8).*
> *Sometimes my dad gets cranky at my mum (boy, 9).*

Discomfort

Failure of other family members to conform to mealtime etiquette was a source of annoyance for some of the children. Several inappropriate eating behaviours were mentioned, such as eating with an open mouth and greediness. While most of these behaviours were reported to originate from siblings, some children commented that their parents also engaged in unpleasant behaviours at mealtimes.

> *Some people eat like slobs (girl, 10).*
> *When my sister chews with her mouth open (girl, 9).*
> *My dad spills beer on me (boy, 10).*

Dinner time was unpleasant for some of the children because they felt embarrassed and uncomfortable while eating. Parental restrictions on dinner time conversations could make mealtimes constrained, as children sometimes wanted to engage in conversation but were not allowed. Some children longed to talk about their day with their family but felt that their family did not care to hear from them. Being intimidated by adults through being closely watched whilst eating was also disconcerting for some of the respondents.

> *I feel a bit embarrassed (boy, 9).*
> *Everyone stares at me (boy, 10).*
> *My dad always tells me to shut up (boy, 10).*
> *They don't ask me what I did today (girl, 9).*

Segregation

Having a family member choose not to eat with the rest of the family was seen by some children as a negative aspect of mealtimes. Most seemed to want everyone in their family to be together for the evening meal. Fathers were mentioned more frequently than mothers as not eating dinner with the rest of the family. This may be the result of some fathers working family-unfriendly hours or a desire for a quiet meal at the end of the day. Children wanted to feel

welcomed during mealtimes, and when required to eat separately from at least one parent they could interpret the separation as rejection.

> *They don't make me feel welcome (boy, 8).*
> *Dad is usually playing on the computer instead of eating with us (boy, 9).*
> *My stepfather sits away from mum and I (girl, 9).*
> *I always have to sit at another table (girl, 10).*

However, some children expressed a preference for eating alone because they considered this to be a more peaceful environment. These children appeared to be particularly sensitive to high noise levels, and they associated mealtimes with excessive noise. Some family members in particular were perceived to talk too much and therefore to make the meal noisier than it needed to be.

> *My family is noisy (girl, 9).*
> *My dad never stops talking (boy, 9).*

Implications

The findings support previous work that has found that children and their parents consider family meals to be an important and positive part of the day. The majority of children in the present study expressed a desire to eat with their families and to be actively included in conversations during family meals. This outcome is especially important in the light of previous research that has identified an association between disengagement between family members and a lack of demonstrated concern for each other during family meals to be associated with overweight status among children. By comparison, responsive communication between family members during meals has been associated with better academic outcomes among children

When one or both parents ate separately from the children, the children sometimes perceived this as a lack of affection. Also, some of the children reported finding conflict at the dinner table stressful. Children in poorly functioning families have been found to consume fewer fruit and vegetables, suggesting that inharmonious family meals may result in reduced physical as well as emotional wellbeing among children.

These findings suggest that social marketing campaigns designed to encourage families to consume their evening meals together could focus on the psychological benefits that can be gained by children, and indeed the whole family, by simply sharing meals regularly. Parenting intervention models emphasise the need to consider parenting practices, parenting goals, parenting style, child socialisation, and child behaviours. Similarly, conceptual models of the influence of the family on child obesity place a strong emphasis on parenting skills, appropriate parental modelling behaviours, the creation of healthful environments and improving nutrition knowledge. The findings of the present study highlight the importance of the elements parenting practices and parenting style that relate to how mealtimes are organised and the approach taken to communication. An authoritative parenting style, where parents exhibit warmth and responsiveness to their children while still demanding of them and in control, is recommended as the most appropriate style for effective family functioning, but also weight management (Rhee, Lumeng, Appugliese, Kaciroti, and Bradley 2006). In terms of parenting practices, the data suggest that in order for mealtimes to be pleasant for all concerned, parents need to demonstrate appropriate modelling behaviours that include the physical act of eating and also communication and inclusion behaviours towards both their children and their partners. Golan

(2006) explains the importance of promoting problem solving and stress management, improving communication between family members and refraining from judgemental behaviour, especially towards the child during meal time.

In conclusion, family meals can play an important role in promoting healthy eating and psychological wellbeing among children. Efforts should therefore be made to equip parents with appropriate parenting skills and encourage them to ensure mealtimes are pleasant occasions where children feel comfortable and welcome. The findings of this study provide insight into the approaches that could be effective in educating families about the benefits of eating together. In particular, messages could use a social norms approach to inform parents of the joy children experience from harmonious family meals and how this can be achieved in their own homes. Parents may be more willing to organise family meals if they are aware of the extent to which their children can enjoy the experience. Messages could encourage parents to actively include their children in dinner-time conversations and have both light-hearted discussions as well as more serious conversations that deal with any issues the children may be experiencing. Messages could also highlight the importance of establishing rules relating to table manners to ensure all family members understand what is expected and to increase the likelihood of pleasant experiences for all involved.

Acknowledgement: This study was funded by the Western Australian Health Promotion Foundation (Healthway (#16187)).

References

Barlow, Sarah E. and William H. Dietz (2002), “Management of child and adolescent obesity: Summary and recommendations based on reports from pediatricians, pediatric nurse practitioners, and registered dietitians,” *Pediatrics*, 110, 236-238.

Golan, Moria (2006), "Parents as Agents of Change in Childhood Obesity - From Research to Practice," *International Journal of Pediatric Obesity,* 1 (2), 66-76.

Rhee, Kyung E., Julie C. Lumeng, Danielle P. Appugliese, Niko Kaciroti, and Robert H. Bradley (2006), "Parenting Styles and Overweight Status in First Grade," Pediatrics, 117 (6), 2047-2054.

Story, Mary T., Dianne R. Neumark-Sztainer, Nancy E. Sherwood, Katrina Holt, Denise Sofka, Frederick L. Trowbridge, and Sarah E. Barlow (2002), “Management of child and adolescent obesity: Attitudes, barriers, skills, and training needs among health care professionals,” *Pediatrics*, 110, 210-214.