

## Starting a family does not encourage parents to eat healthier

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It is often thought that starting a family will lead parents to healthier eating habits, as they try to set a good example for their children. Few studies, however, have evaluated how the addition of children into the home may affect parents' eating habits. Changes in family finances, the challenges of juggling schedules, or a child's eating preferences may influence how a family eats. In one of the first longitudinal studies to examine the effect of having children on parents' eating habits, researchers have found that parenthood does not lead to healthier diets. The research is published online today in the *Journal of the Academy of Nutrition and Dietetics*.

"We found that parenthood does not have unfavorable effects on parent's diets but neither does it lead to significant improvements compared to non-parents, as health practitioners would hope," reports lead investigator Helena H. Laroche, MD, University of Iowa and the Iowa City VA Medical Center. "In fact, parents lag behind their childless counterparts in decreasing their intake of saturated fat, and their overall diet remains poor."

The study evaluated the diets of 2,563 adults enrolled in the Coronary Artery Risk Development in Young Adults (CARDIA) cohort study, a multi-center longitudinal prospective cohort study to identify the development of coronary risk factors in young adults. The study measured the change from the baseline year, 1985-1986, to year seven (1992-1993) for intake of percent saturated fat, calories, daily servings of fruits and vegetables and sugar-sweetened beverages, and frequency



of fast <u>food intake</u>. None of the subjects had children in the home at the baseline year.

Researchers found that percent saturated fat decreased among both groups, but parents showed a smaller decrease compared to non-parents. There were no statistically significant differences in change in caloric, fruit and vegetable, sugar sweetened beverage, or fast food intakes. The effects of children in the household did not differ significantly by race, sex, age, or body mass index at the baseline year.

Parents decreased their saturated fat intake by 1.6% compared to 2.1% lower intake by non-parents. "A variety of factors may explain this," says Dr. Laroche. "Finding foods that children like and request has been described by parents as one of the major factors influencing purchasing decisions. Given that marketing strategies to US children focus on high fat, high sugar foods, these requests are often for less healthy foods."

Parents and non-parents showed an increase in fruit and vegetable consumption over time; however, the increase was greater than in other national studies. "Perhaps the motivation children provide to eat more fruits and vegetables balances out time factors, keeping parents in line with non-parents in increasing their intake. Children may have the potential to motivate this change, but perhaps in the US parents need more financial support and education, such as provided in other countries, to increase their fruit and vegetable intake further than they have," suggests Dr. Laroche.

Dr. Laroche notes that the data was collected from 1985 to 1993, and changes since that time could alter the findings in current families. Also self-reported dietary data is subject to desirability and recall biases.

"This study makes use of some of the best data available, but further study in a new cohort is warranted to monitor parent eating behaviors,"



Dr. Laroche concludes. "The transition to parenthood may be a teachable moment for dieticians and health practitioners to educate adults not only on child nutrition or nutrition for pregnancy, but on changing diet patterns for the whole family as well."

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