

Setting family rules promotes healthier behavior in children

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Who says your kids don't listen to you? An Indiana University study has found that setting specific family rules about healthy eating and sedentary behavior actually leads to healthier practices in children.

Data analyzed for the study was originally part of a data set used to evaluate the Wellborn Baptist Foundation's HEROES program, a K-12 school-based obesity prevention initiative set in the Illinois, Indiana and Kentucky tri-state area. However, lead author Alyssa M. Lederer, doctoral candidate and associate instructor in the Department of Applied Health Science at the School of Public Health-Bloomington, was able to use the data to look further into the connection between family rules and sedentary behavior and eating behavior, as well as family rules and weight status.

"Childhood obesity has really become a health crisis, so as researchers we're trying to see what we can do to lessen the toll," Lederer said.

Data for the study was collected from a sample of nearly 3,000 participants from fourth through eighth grade. The family rules that were specifically analyzed related to time spent watching television, playing video games and on the computer, and what children were or were not allowed to eat.

Primarily, the study showed that students coming from households with healthy behavioral guidelines tended to make healthier choices for themselves. For example, the children with set family rules for what they



could or could not eat were less likely to consume fast food and were more likely to eat fruits and vegetables than students without guidelines. The same went for time spent with television, video games and computer use. Moreover, the study revealed a profile of the demographics of children most likely to have family rules, citing that students coming from families that had eating and sedentary rules were more likely to be younger, female, white and of lower socioeconomic status.

Although no direct correlation between family rules and weight status was evident from the data, there was a direct correlation between the healthy behaviors shown and weight status. Lederer said this means that the family rules may play more of an intermediary role in this regard—family health rules lead to behavioral change, and behavioral change leads to weight-loss.

"As we try to figure out ways to tackle <u>childhood obesity</u>, this is something that families can do very easily," Lederer said. "It doesn't involve money or policy change, and it can make a very important change in their children's health."

Lederer presented "Setting rules to improve healthy behavior: The relationship between family rules and children's demographics, dietary and sedentary activities, and weight status," at the American Public Health Association's Annual Meeting and Exposition in New Orleans, Louisiana on Nov. 17 with co-author Mindy Hightower King, research scientist at IU's Center on Education and LifeLong Learning. Co-authors Danielle Sovinski, research associate at IU's Center on Education and Lifelong Learning, and Nayoung Kim, doctoral candidate and associate instructor in the Department of Applied Health Science at the School of Public Health-Bloomington, were unable to attend.

Provided by Indiana University



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