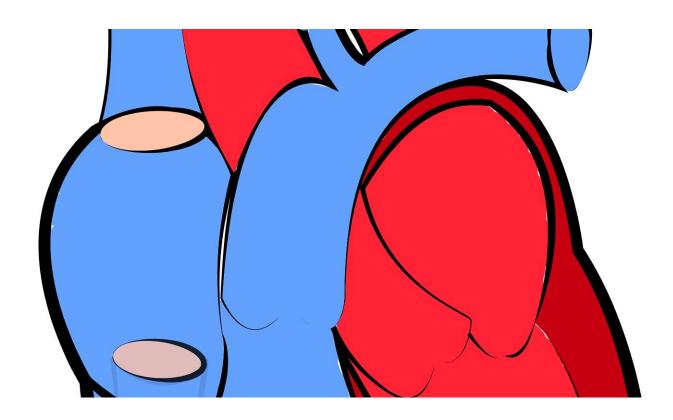


Healthy eating behaviors in childhood may reduce the risk of adult obesity and heart disease

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How children are fed may be just as important as what they are fed, according to a new scientific statement from the American Heart Association, "Caregiver Influences on Eating Behaviors in Young



Children," published today in the *Journal of the American Heart Association*.

The statement is the first from the Association focused on providing evidence-based strategies for parents and caregivers to create a healthy <u>food</u> environment for young children that supports the development of positive eating behaviors and the maintenance of a healthy weight in childhood, thereby reducing the risks of overweight, obesity and cardiovascular disease later in life.

Although many children are born with an innate ability to stop eating when they are full, they are also influenced by the overall emotional atmosphere, including caregiver wishes and demands during mealtimes. If children feel under pressure to eat in response to caregiver wants, it may be harder for them to listen to their individual internal cues that tell them when they are full.

Allowing children to choose what and especially how much to eat within an environment composed of healthy options encourages children to develop and eventually take ownership of their decisions about food and may help them develop eating patterns linked to a healthy weight for a lifetime, according to the statement authors.

"Parents and caregivers should consider building a positive food environment centered on healthy eating habits, rather than focusing on rigid rules about what and how a child should eat," said Alexis C. Wood, Ph.D., the writing group chair for the scientific statement and assistant professor at the U.S. Department of Agriculture/Agriculture Research Services Children's Nutrition Research Center and the department of pediatrics (nutrition section) at Baylor College of Medicine in Houston.

The statement suggests that parents and caregivers should be positive role models by creating an environment that demonstrates and supports



healthy food choices, rather than an environment focused on controlling children's choices or highlighting body weight. Parents and caregivers should encourage children to eat healthy foods by:

- providing consistent timing for meals;
- allowing children to select what foods they want to eat from a selection of healthy choices;
- serving healthy or new foods alongside foods children already enjoy;
- regularly eating new, healthy foods while eating with the child and demonstrating enjoyment of the food;
- paying attention to a child's verbal or non-verbal hunger and fullness cues; and
- avoiding pressuring children to eat more than they wish to eat.

Wood noted that some parents and caregivers may find it challenging to allow children to make their own food decisions, especially if the children become reluctant to try new foods and/or become picky eaters. These behaviors are common and considered normal in early childhood, ages 1 to 5 years, as children are learning about the tastes and textures of solid foods. Imposing rigid, authoritarian rules around eating and using tactics such as rewards or punishments may feel like successful tactics in the short term. However, research does not support this approach; rather, it may have long-term, negative consequences. An authoritarian eating environment does not allow a child to develop positive decision-making skills and can reduce their sense of control, which are important developmental processes for children.

In addition, the authoritarian approach has been linked to children being more likely to eat when they are not hungry and eating less healthy foods that are likely higher in calories, which increase the risk of overweight and obesity and/or conditions of disordered eating.



On the other hand, an indulgent approach, where a child is allowed to eat whatever they want whenever they want, does not provide enough boundaries for children to develop healthy eating habits. Research has also linked this "laissez-faire" approach to a greater risk of children becoming overweight or having obesity.

Research does suggest that some strategies can increase children's dietary variety during the early years if they are "picky" or "fussy" about foods. Repeatedly offering children a wide variety of healthy foods increases the likelihood they will accept them, particularly when served with foods they prefer. In addition, caregivers or parents who enthusiastically eat a food may also help a child accept this food. Modeling eating healthy foods—by caregivers, siblings and peers—is a good strategy for helping children to be open to a wider variety of food options.

"Children's eating behaviors are influenced by a lot of people in their lives, so ideally, we want the whole family to demonstrate healthy eating habits," said Wood.

It is important to note that not all strategies work for all children, and parents and caregivers should not feel undue stress or blame for children's eating behaviors. "It is very clear that each child is an individual and differs in their tendency to make healthy decisions about food as they grow. This is why it is important to focus on creating an environment that encourages decision-making skills and provides exposure to a variety of healthy, nutritious foods throughout childhood, and not place undue attention on the child's individual decisions," concluded Wood.

Caregivers can be a powerful force in helping <u>children</u> develop healthy eating habits, and yet their role is limited by other factors. The statement authors encourage policies that address barriers to implementing the



statement's recommendations within the wider socioeconomic context, including social determinants of health such as socio-economic status, food insecurity and others. While efforts that encourage caregivers to provide a responsive, structured feeding environment could be an important component of reducing obesity and cardiometabolic risk across the lifespan, they note that they will be most effective as part of a multi-level, multi-component prevention strategy.

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