

# Perceptions of How Parents of Early Adolescents Will Personally Benefit From Calcium-Rich Food and Beverage Parenting Practices

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## ABSTRACT

**Objective:** To identify and rank perceived personal benefits from parenting practices that promote intake of calcium-rich foods and beverages (CRF/B) by early adolescents.

**Methods:** A convenience sample of parents/caregivers (n = 133) of early adolescents (10–13 years) from 6 states (CA, HI, MN, OH, OR, UT) participated in a qualitative study using a Nominal Group Technique process. Benefits identified by parents/caregivers were ranked by importance, given a score weight, and summed to create a total weighted score across states.

**Results:** The top benefit from making CRF/B available was parent emotional rewards. The top benefit perceived by parents from role modeling intake of CRF/B and setting expectations for intake of CRB was child health promotion.

**Conclusions and Implications:** Child health promotion and parent emotional rewards were important perceived benefits derived from CRF/B parenting practices, and thus, should be included as the focus of education to increase the frequency of these practices.

**Key Words:** adolescents, calcium-rich foods and beverages, parents, practices, availability, expectations, role modeling (*J Nutr Educ Behav.* 2014;46:595–601.)

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## INTRODUCTION

National Health and Nutrition Examination Survey data (2003–2006) indicated that only 15% and 22% of early adolescent girls and boys

(9–13 years) in the US, respectively, had intakes of calcium above 1300 mg/d from food sources.<sup>1</sup> Therefore, few adolescents meet recommendations<sup>2</sup> to address the role of calcium in bone health.<sup>3,4</sup>

Several studies have examined factors associated with intake of calcium-rich food/beverages (CRF/B) by adolescents, including the physical and social environment in the home,<sup>5–7</sup> consistent with Social Cognitive Theory (SCT) constructs.<sup>8</sup> The physical availability of dairy foods and milk in the home at mealtimes was positively associated with calcium intakes among a cross-sectional sample of adolescents at baseline (n = 4,079) and at follow up 5 years later (n = 1,521).<sup>5,6</sup> The social environment involves the ability of adolescents to see parents or other adults role modeling CRF/B consumption. Based on national intake data, parent-child correlations with respect to calcium and dairy intakes were moderate for mother-daughter dyads (r = 0.30) and significantly stronger than correlations for father-daughter dyads.<sup>7</sup> These findings were similar to a report by Fisher et al<sup>9</sup> in which consumption of milk by girls was positively related to their

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mothers' milk intake, and greater milk and lower soft drink intakes were related to higher calcium intakes. Survey data from 661 multi-ethnic parents showed that parental expectation for healthful beverage intake among their adolescent children was positively associated with parental calcium intake from dairy foods.<sup>10</sup>

Qualitative semistructured individual interviews with parents of early adolescent children ( $n = 168$ ) have further indicated that parents use several strategies to promote CRF/B intakes in their child.<sup>11</sup> These included setting expectations that children would consume calcium-rich foods, making these foods available, and preparing these foods for their children. Focus group interviews indicated that parental expectations for healthful beverage intakes by adolescents were managed by making healthful beverages (eg, milk) available and accessible at home and limiting intake of beverages perceived as less healthful (eg, soft drinks).<sup>12</sup>

Making CRF/B available, role modeling, and setting expectations for healthful beverage intakes are positive parenting practices that may influence intake of CRF/B by early adolescents; therefore, a better understanding of the underlying motivation for parents to engage in these practices is needed. Although studies examining associations between these practices and intakes by early adolescents exist, little is known about the benefits parents expect as a result of engaging in these practices. These motivational factors could serve as the basis for educational efforts to increase the frequency of positive parenting practices with respect to CRF/B. The purpose of this study was to identify perceived benefits from parenting practices that promote intake of CRF/B by early adolescents using qualitative methods and to prioritize by degree of importance.

## METHODS

### Study Design and Data Collection

For this qualitative study, a convenience sample of parents or caregivers of children aged 10 to 13 years ( $n = 133$ ) across 6 states

(California [ $n = 27$ ], Hawaii [ $n = 21$ ], Minnesota [ $n = 19$ ], Ohio [ $n = 30$ ], Oregon [ $n = 15$ ], and Utah [ $n = 21$ ]) participated in a series of group sessions involving a Nominal Group Technique (NGT) process (described below) from October 2010 to October 2011. Inclusion criteria were: 1) being the parent or caregiver of a child (10–13 years) and the adult responsible for food acquisition and preparation for this child; 2) having lived in the US for at least 12 months; 3) being comfortable speaking English; and 4) self-identifying as non-Hispanic white, Hispanic or Latino, Asian or Asian American, or African American, or a mixture of any of these 4 groups. Each site recruited all participants from only 1 race/ethnic group for each session to encourage participation and openness based on a common background and cultural perspective.

Prior to recruitment, each researcher chose to recruit parents from racial/ethnic populations based on previous experience conducting research with that particular group in their study location, and to gain insights on how to develop future nutrition education materials that would be culturally accepted among racial/ethnic populations of interest to each researcher in their state. This strategy was used to ensure an adequate representation of a wide variety of sociocultural perspectives on personal benefits derived from parenting practices. Perceived benefits from parenting practices (making CRF/B available, role modeling CRF/B intake, setting healthy beverage expectations) were explored with 5–6 group NGT sessions per practice, for a total of 16 sessions across all states. Each state conducted 1 session for each parenting practice, except Oregon ( $n = 2$ ; making CRF/B available and setting expectations), Hawaii ( $n = 2$ ; both role modeling), and Utah ( $n = 3$ ; making CRF/B available and 2 for setting expectations). Each parent participated in only 1 session. The total number of participants across sessions for each parenting practice was: making CRF/B available ( $n = 39$ , 29%), role modeling ( $n = 49$ , 37%), or setting expectations for healthful beverage intake ( $n = 45$ , 34%).

Participants were recruited using fliers, e-mail, verbal and written

announcements in bulletins or newsletters, personal contacts, and presentations at groups. Organizations and groups involved in this study included Cooperative Extension Service (eg, Expanded Food and Nutrition Education Program), community centers, food shelves/pantries, faith-based groups, after-school programs, schools, sports teams, scouting groups, and adult groups. Sessions were conducted with parents/caregivers in various settings, such as university conference rooms, church meeting rooms, parks, community centers, libraries, and athletic facilities. Sessions lasted between 60 and 105 minutes. In return for participation, parents were given cash, gift certificates/cards, or merchandise per each institution's remuneration guidelines. All groups were conducted in English, except for 2 states where some phrases were translated into Spanish or Mandarin for clarification. The study protocols were approved by the institutional review board of each participating university, and each participant provided informed consent.

### NGT Procedures

NGT is a qualitative research method that helps generate ideas about an unknown phenomenon through a 4-stage process in which individuals silently reflect on a question and write down thoughts, group members' ideas are shared in a round-robin fashion, the group discusses each idea for clarification, and individuals rank the ideas presented based on those felt to be of highest priority related to the initial question.<sup>13,14</sup> Advantages to using NGT methodology include the ability to have all group members share ideas equally, without any one person dominating the conversation or ideas presented; to provide an environment in which every idea is considered; to enhance an individual's commitment to generating ideas because of the written portion of the NGT process; and to minimize judgment errors of researchers in pooling respondents' thoughts about the question, because of the group ranking process.<sup>13,14</sup> In this study, NGT sessions were conducted using a standardized script that was

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