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Qualitative Research



Traditional Foods and Practices of Spanish-Speaking Latina Mothers Influence the Home Food Environment: Implications for Future Interventions

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ABSTRACT

This study aimed to obtain in-depth information from lowincome, Spanish-speaking Latino families with young children to guide the development of culturally appropriate nutrition interventions. Focus groups were used to assess parent's knowledge about healthful eating, the home food environment, perceived influences on children's eating habits, food purchasing practices, and commonly used strategies to promote healthful eating among their children. Thirty-four Latino parents (33 women; 27 born in Mexico; 21 food-insecure) of preschool-aged children participated in four focus group discussions conducted in Spanish by a trained moderator. The focus groups were audiotaped, transcribed, translated, and coded by independent raters. Results suggest that in general, parents were very knowledgeable about healthful eating and cited both parents and school as significant factors influencing children's

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eating habits; at home, most families had more traditional Mexican foods available than American foods; cost and familiarity with foods were the most influential factors affecting food purchasing; many parents had rules regarding sugar intake; and parents cited role modeling, reinforcement, and creative food preparation as ways to encourage children's healthful eating habits. Finally, parents generated ideas on how to best assist Latino families through interventions. Parents indicated that future interventions should be community based and teach skills to purchase and prepare meals that include low-cost and traditional Mexican ingredients, using hands-on activities. In addition, interventions could encourage and reinforce healthy food-related practices that Latino families bring from their native countries. J Am Diet Assoc. 2011;111:1031-1038.

atino children are disproportionately affected by the current childhood obesity epidemic. In the United States, it is estimated that 38.2% of Latino children aged 2 to 19 years are overweight or obese, compared to their non-Latino black (35.9%) and non-Latino white (29.3%) counterparts (1). Consequently, Latino children have a higher risk of acquiring obesity-related conditions such as type 2 diabetes compared to their non-Latino counterparts (2,3). Because Latinos are currently the largest minority in the United States with a rapidly growing population, fiscal demands on the health care system due to obesity will continue to rise during the coming years.

According to the Ecological Perspective, individuals' eating behaviors are influenced by both proximal and distal environments (4). A young child is highly influenced by the home food environment (5-10). The home food environment is created by parents or caregivers of young children who can make certain foods available or unavailable, encourage children to eat certain foods, create rules about food, use positive reinforcement, and model healthy dietary behaviors (11-15). These parent practices are influenced by the broader environmental milieu (16) as well as by sociocultural factors, such as parents' attitudes, preferences, and knowledge (17-19), and demographic variables such as ethnicity (20,21), acculturation (22,23), and family income (20,24,25).

Among Latino families, acculturation is a particularly significant factor. Acculturation is a process of cultural

Structural factors	Focus group questions
Availability of specific foods	Please think about the types of food you usually have available in your house. Can you give me some example of healthy foods that are usually available in your home? Are these foods easy for your child to get to? How? If you had to state one thing that influences what kind of food you have available at home, what would it be?
	Prompts: How much influence do your children, spouse, other adults have? How much influence does the cost of food have? How much influence does the convenience of food have?
Characteristics of foods available	In general, do you consider the foods you have available in your house more American or more Mexican (or other country of origin)? Why? Which do you think is more healthy? Why?
Social structures and rules at home surrounding foods	What type of specific rules do you have at your house related to food? Please give some examples.
Media and cultural messages	What do you consider healthy eating for a child? What is mealtime like for your children in your house? How do you or other adults in your household make special efforts for your child to eat healthy? How do you get your child to eat something he or she doesn't like?
Icebreaker/additional questions	When you hear the term "healthy eating," what does that mean to you? What should children eat to be healthy? In your house, who is in charge of planning, cooking, and serving meals? Where do you shop for food for your home (eg, grocery stores, convenience stores, farmers' markets)? What factors influence what you buy at these stores/markets?

Figure 1. Structural model of health behavior factors and corresponding focus group questions administered to Latino families living in central Texas.

transition and assimilation that is linked to the length of time a family has lived in an immigrated country (22). Among Latinos, greater acculturation tends to be associated with less healthy diets. For example, studies have shown that more acculturated individuals consume more sugar, red meat, cheese, and added fat and less legumes, rice, vegetables, and fruits (22,23,26). On the other hand, eating less fried food and avoiding high-fat foods is also associated with greater acculturation (22).

Previous qualitative research has explored the home food environment within the Latino household (27-29), but very few studies have explicitly focused on low-income traditional Latinos. Two focus group studies conducted in Arizona and Boston with food-stamp eligible Latina mothers and Special Supplemental Nutrition Program for Women, Infants, and Children participants found that unfamiliar produce, social networks, and cost of healthy foods were among some of the barriers to healthy feeding among these focus groups (28,29). Another study found that cost, taste, time, family preference, convenience, body image, and weight loss were the primary factors related to household nutrition decision making among Latinos in San Diego County at various acculturation levels (27).

Given the high prevalence of childhood obesity among Latinos, the negative consequences associated with childhood obesity, and the increasing number of Latino families who are immigrating to the United States, interventions to help families who are less acculturated to the American culture prevent the development of overweight and to decrease the prevalence of obesity among their children are warranted. However, to ensure cultural appropriateness of interventions, more qualitative research examining the risk factors for child overweight and obesity among these Latino families is needed. Thus, the overarching goal of this study was to obtain in-depth information from low-income, less-acculturated Latino parents of preschool-aged children to guide the development of culturally specific nutrition interventions. The specific objectives were to assess the home food environment (eg, availability of specific foods, physical characteristics of the food, rules surrounding eating, and media and cultural messages surrounding food, perceived influences on children's eating habits, common food purchasing practices, and commonly used strategies to promote healthful eating among their children.

METHODS

This qualitative study collected data from 34 parents of preschool-aged children through four focus group discussions. Institutional Review Board approvals from the Download English Version:

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