

Research and Professional Briefs

Behavioral Contexts, Food-Choice Coping Strategies, and Dietary Quality of a Multiethnic Sample of Employed Parents

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ABSTRACT

Employed parents' work and family conditions provide behavioral contexts for their food choices. Relationships between employed parents' food-choice coping strategies, behavioral contexts, and dietary quality were evaluated. Data on work and family conditions, sociodemographic characteristics, eating behavior, and dietary intake from two 24-hour dietary recalls were collected in a random sample cross-sectional pilot telephone survey in the fall of 2006. Black, white, and Latino employed mothers (n=25) and fathers (n=25) were recruited from a low/moderate income urban area in upstate New York. Hierarchical cluster analysis (Ward's method) identified three clusters of parents differing in use of food-choice coping strategies (ie, Individualized Eating, Missing Meals, and Home Cooking). Cluster sociodemographic, work, and family characteristics were compared using χ^2 and Fisher's exact tests. Cluster differences in dietary quality (Healthy Eating Index 2005) were analyzed using analysis of variance. Clusters differed significantly ($P \leq 0.05$) on food-choice coping strategies, dietary quality, and behavioral contexts (ie, work schedule, marital status, partner's employment, and number of children). Individualized Eating and Missing Meals clusters were characterized by non-standard work hours, having a working partner, single parenthood and with family meals away from home, grabbing quick food instead of a meal, using convenience entrées at home, and missing meals or individualized eating. The Home Cooking cluster included considerably more married fathers with nonemployed spouses and

more home-cooked family meals. Food-choice coping strategies affecting dietary quality reflect parents' work and family conditions. Nutritional guidance and family policy needs to consider these important behavioral contexts for family nutrition and health.

J Am Diet Assoc. 2011;111:401-407.

Employed parents use food-choice coping strategies to integrate the multiple demands of work and family roles as they feed themselves and their families (1,2). Parents' food choices reflect individual agency as well as the behavioral contexts for those choices (3,4). Individual agency represents people's personal choices as they respond to their life circumstances (5,6). Behavioral contexts reflect parents' key personal and social characteristics, such as social class, race/ethnicity, sex, and social roles, such as marriage, parenthood, and employment (7-11). Social class determines exposure to social advantages and disadvantages (12), including food availability, access, and cost (13-15). Race/ethnicity affect food access and availability (15-20), but also reflect food ideals, identities, and roles (19,21). Sex is a basic social category affecting access to resources and including expectations for the type and amount of food eaten (22,23). Marriage and parenthood can affect diet quality (24-27), nutrition concerns, and motives (28,29). Employment affects food choices through time demands, exposure to job strain, and workplace food access (30). Parents' individual food choices have implications for family nutrition because they often control what foods get into the home and model choices; parental intake is closely associated with intake of other household members (31-33). Much of the research on relationships between work and family conditions and food-choice behaviors has tended to focus on a single behavior (eg, skipping breakfast) or a small set of behaviors (eg, family meals and takeout food); however, parents use combinations of food-choice strategies throughout the day to integrate demands of work and family (2).

This analysis was based on formative research aimed at understanding how parents' work and family roles affected their food-choice strategies (1). The purpose of the current study was to investigate how the food-choice coping strategies of employed parents were related to their behavioral contexts and dietary intake. Specifically, this study aimed to determine how parents' food-choice coping strategies varied with their work and family roles and how their use of these strategies was related to dietary intake.

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Manuscript accepted: September 2, 2010.

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0002-8223/\$36.00

doi: 10.1016/j.jada.2010.11.012

METHODS

Participants

Employed parents were randomly recruited by the University Survey Research Institute, a full-service survey research facility, for three telephone interviews using random-digit dialing in low- to moderate-income urban zip codes in upstate New York in the fall of 2006. Eligibility criteria included working at least 20 hours/week, one or more children under age 17 years at home, and family income <\$60,000/year. Each participant received a welcome letter and a food amounts estimation booklet (34).

Data Collection

The 45-minute baseline interview, conducted by University Survey Research Institute personnel, assessed behavioral contexts, including sociodemographics (sex, race/ethnicity, education, income), work (hours, schedule), and family (marital, parental) characteristics using 128 standard items (35-38).

Twenty-two items measured food-choice coping strategies, including food at/away from home, missing meals, individualizing meals, time saving, and planning. These 22 items were developed, cognitively tested (39), and convergent validity was established through formative research (1,2). Eighteen of these items, originally scaled from one to three (never/rarely, sometimes, often/always), were dichotomized by combining the sometimes and often/always responses. For three items (as noted), sometimes and rarely responses were combined for more equal distribution. Four other items originally scaled as frequency per week of home-cooked, take-out, fast-food, or restaurant family meals, were dichotomized using the median (2). In a separate but similar sample, all 22 items met the criterion ($P \leq 0.05$) for temporal reliability (40) during 3 weeks (Spearman's $\rho = 0.41$ to 0.87).

Subsequently, 50 participants completed two more interviews that were 24-hour dietary recalls on days after working days, through the Nutrient Data System for Research (version 2006, Nutrition Coordinating Center, University of Minnesota, Minneapolis; copyright Regents of the University of Minnesota). Earlier studies have demonstrated that reasonable estimates can be obtained from two telephone 24-hour recalls (41-43). Work days were selected in order to focus on employment demands. Two registered dietitians, certified in the use of the Nutrient Data System for Research, conducted these recalls; a third reviewed recalls for accuracy and reliability. Participants who completed all three interviews received \$50. The Cornell University Institutional Review Board approved the study protocol and consent procedures. All participants provided verbal consent.

Analyses

Subgroups of participants, based on their food-choice coping strategies, were identified through cluster analysis. Appropriate for small samples, this multivariate procedure identifies relatively homogenous clusters through inter-subject similarity (44,45), with the goal of minimizing within-group variability and maximizing between-group variability (46). The 22 food-choice coping strate-

gies analyzed with Ward's hierarchical cluster method and squared Euclidean distances formed three broad clusters (46). The contingency coefficient (45) was used to test the agreement between this cluster solution and two other clustering methods (between- and within-group linkage). These cluster solutions closely corresponded to results from Ward's method, as indicated by statistically significant contingency coefficients of 0.73 (within-group) and 0.71 (between-group) confirming the stability of the classification. Each of three clusters was named after its distinguishing food-choice coping strategies: (Individualized Eating, Missing Meals, and Home Cooking) (Table 1).

Analyses then examined how clusters were associated with participants' individual characteristics and work and family conditions (Table 2) using χ^2 , Fisher's exact test, and analysis of variance as appropriate. Next, analysis of variance was used to examine how cluster membership was associated with participants' diet quality using Healthy Eating Index 2005 (HEI), a validated measure (47). For each participant complete dietary data was averaged over two recalls; total and 12 subcategory HEI scores were calculated. Higher scores indicate greater dietary quality. All statistical analyses were conducted using Statistical Package for the Social Sciences (version 14.0, 2006, SPSS, Inc, Chicago, IL).

RESULTS AND DISCUSSION

Sixty-four of 465 people screened were eligible; 78% were recruited and retained for three interviews. Fifty-six parents (87.5%) completed the baseline interview; 50 of 56 (78%) completed two additional 24-hour dietary recall interviews. Fifty-six parents were included in all analyses, except those assessing associations with dietary intake where the smaller sample ($n=50$) was used. There were no statistically significant differences between those who completed only the baseline or all three interviews, except that all noncompleters were women. Of the 56 participants (31 mothers and 25 fathers) aged 23 to 56 years, 20 self-identified as black (36%), 18 as white (32%), and 18 as "other" (32%); and 20 self-identified ethnically as Hispanic/Latino (36%). All of the fathers but only 13 of the 31 mothers (42%) lived with a spouse/partner. Seventeen of 56 (30%) had a high school education or less. Nine of 56 (16%) worked part-time, 28 of 56 (50%) worked full-time, and 19 of 56 (34%) worked overtime. Six of 25 fathers and 2 of 31 mothers held more than one job. Twenty of 56 (32%) worked variable schedules. Of those with a spouse or partner, 13 of 25 fathers (52%) and 9 of 31 mothers (69%) had an employed spouse/partner.

Food-Choice Coping Strategy Clusters

Parents in the Individualized Eating cluster were distinguished by the majority reporting that everyone in the family often fixes something different for a main meal on work days. These parents, along with those in the Missing Meals cluster, were more likely to feed children and adults separately. These parents reported more frequent main meals at sit down/buffet and fast-food restaurants. They often packed a lunch to take to work, kept food at

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