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APPLICATIONS

Family Mealtimes: More than Just Eating Together

Childhood obesity has become one of America's most serious health problems, with the prevalence steadily increasing over the past 4 decades (1-4). While childhood obesity rates have doubled, the rate of adolescent obesity has tripled (5-11). The causes of obesity are complex and include genetics; lack of physical activity; over-consumption of high-fat, energy-dense foods; and family, school, and community environments. National survey data indicate that only 2% of school-aged children meet the dietary recommendations for all food groups (12). In addition, as children become adolescents, the quality of their diet tends to decline (12).

The family can exert a strong influence on children's diet and food-related behaviors, which, in turn, may impact their weight status (13). Research shows that the family meal has a significant impact upon the nutritional quality of children's diets (14-16). A higher frequency of family meals is associated with a greater intake of fruits, vegetables, and milk, and a lower intake of fried foods and soft drinks (14-16). Family meals also can impact the development of language and literacy skills (17) and can generate a decrease in risk-taking behaviors (18).

Studies indicate that, although 74% of adolescents report that they enjoy eating with their families, 53% report that they do not regularly eat together (19). There is a decline in family meal frequency throughout adolescence. Middle school- and junior high school-aged youth eat more family meals than high school-aged youth (19). It is challenging for families to find time to sit down at the family table while they juggle demands from school, work, and extracurricular activities (19).

The present study extends previous research about family mealtimes by examining family meal frequency and the family mealtime environment from the perspectives of both adolescents and parents. The researchers found that both adolescents and parents have a positive view of family meals and, therefore, recommend that dietetics professionals capitalize on these positive attitudes to promote family meal frequency.

Dietetics professionals working with adolescents and

their families should encourage families to make the family mealtime a priority and try to have at least four family meals per week. Families may need help in identifying realistic ways to increase the frequency of family meals that take into consideration work, school, and extracurricular activity schedules. Families can learn to plan ahead, think creatively, and make adjustments to fit their schedule. For example, the family may want to change the time of day they eat together or have a tailgate picnic before or after a sporting event.

Dietetics professionals can also help families implement strategies that will help make the most of family mealtimes. Communities, schools, and businesses all can support and promote family meals. Emphasis should be on pleasure and enjoyment at mealtimes. Family mealtime is not the time to engage in serious debates about issues like discipline or money. Conversation should be focused on the positive, saving discipline and controversial discussions for another time. Mealtime interruptions and distractions (eg, television, telephone, and radio) should be avoided. To increase the feeling of togetherness, children can be involved in meal preparation. There are numerous age-appropriate ways for children and adolescents to help with meal preparation. By implementing these and other strategies, family mealtimes can become more pleasurable.

Family mealtimes are associated with more positive dietary intake and healthful behaviors among adolescents. Family meals also can facilitate family interaction, communication, and a sense of unity. Because of the multiple benefits of eating meals together as a family, dietetics professionals working with youth and families should emphasize the importance of family meals. Promoting the family meal is a potential public health measure for improving dietary quality, reducing overweight, and improving educational and social outcomes.

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