

FEBRUARY 25, 2013



HARVARD
School of Public Health

NPR/Robert Wood Johnson Foundation/Harvard School of Public Health

A Poll About Children and Weight:

Crunch Time During the American Work and School Week - 3pm to Bed

SUMMARY

Introduction

Childhood obesity is a major public health challenge today, with complex roots interwoven into nearly every facet of American life. This poll addresses one narrow slice of this web: the challenges that families face during the “crunch time” of the work and school week, between 3pm and the time children go to bed. Compared to the school day, this may be a time when parents and other adults in the household have more influence over what their children eat and do, but it is also a busy time when many are racing home from work, arranging for their children’s extracurricular activities, trying to monitor homework, and getting ready for the next day. To get a detailed view of this critical window of time, this poll assesses a nationally representative sample of children, through the eyes of their parents or other responsible adults in their household who know what they ate, drank and did the day before the poll. In this report, we refer to this group of respondents as “parents” because parents are 87% of them, but the total group also includes grandparents and foster parents as well as aunts, uncles, and siblings. This poll aims to examine 1) the daily challenges in helping children achieve or maintain a healthy weight; 2) perceptions of children’s activities and food or drink consumption; 3) practices around the “family dinner”; 4) family practices around restful sleep; and 4) family special events as compared to daily practice.

I. The Daily Challenges in Helping Children Maintain or Achieve a Healthy Weight

Although parents agree it is important for their children to eat and exercise in a way that maintains or achieves a healthy weight, many find it difficult to do. Nearly all children (95%) live with parents who agree that it is important their child eats in a way that helps them maintain or achieve a healthy weight (82% “very important” and an additional 13% “somewhat important.”) The same is true when it comes to exercise; 95% of children live with care providers who agree it is important they exercise in a way that helps them maintain or achieve a healthy weight (76% “very important” and an additional 19% “somewhat important.”) But more than four in ten children (44%) have parents who say it is difficult to make sure they eat this way, and roughly a third of children (36%) have parents who say it is difficult to make sure they exercise this way.

In the crunch time window, a substantial share of children are consuming foods and drinks that can lead to unhealthy weight gain, largely with parents’ approval and driven by taste. When examining what children ate in the afternoon, during family dinners, and after dinner, the poll found that more than half of children (60%) ate or drank something that can lead to unhealthy weight gain, as perceived by their parents. Of those who did consume such items, most (79%) did so in part because their parent doesn’t “mind if they have these foods/drinks sometimes” as long as they eat healthfully “generally”. And for nearly three-quarters of children (73%), taste played a key role – quite simply, the children like the taste of the food. Other factors were perceived to play a much lesser role. For 16% of children, parents said they did not

have time to get or prepare different foods and, similarly, for 15% the parent relied on whatever was in the house. Relatedly, for a small number of children (6%), the parent said explicitly they were too tired to get or make something different. For 14% of children, the family was on the go and these foods/drinks were easier. For 11% of children, options that do not generally lead to unhealthy weight gain were too expensive, and for 7% of children, these items were consumed when there were no adults watching what the children ate.

Parents report a substantial share of children are not exercising enough to maintain or achieve a healthy weight in the crunch time window. In parents' views, more than a quarter of children (28%) did not get physical activity to the degree that helps them maintain or achieve a healthy weight on the day in question during the crunch time window. While parents felt that some children did not get sufficient exercise during this time because they had exercised earlier in the day, 15% of children had different reasons. Of those children who did not get sufficient exercise during the crunch window and parents did not say earlier exercise was the reason, parents felt the primary reasons were that exercise was difficult to fit into their schedule (49%) and the children preferred other activities (46%). The costs of classes, team equipment or gym fees played a role for nearly a quarter of these children (21%). Finding a place to exercise was a final issue, as 12% of children had a provider who was too tired to take them somewhere to exercise and roughly one in ten had a difficult time finding a place that is safe from traffic (10%) or crime (8%).

In trying to help their children maintain or achieve a healthy weight overall, parents face problems that extend beyond this crunch time window, including those related to food and beverage advertising, a lack of walkable sidewalks, and poor school lunch options. For 43% of children, parents say the amount of advertising of foods that can lead to unhealthy weight gain presents a problem for them in trying to help their child achieve or maintain a healthy weight. For roughly a third of children, parents report they face the following problems: many such foods are offered at lunch at school (33%); the costs of exercise equipment, gym memberships or teams fees is too high (33%); there aren't good sidewalks near their home, so the family drives instead of walking (31%); and there are few places for the child to spend time with friends that do not serve these foods (31%). While advertising and the lack of walkable sidewalks are among the top 5 problems facing parents of children all age groups, school-related factors rise to the top for parents of children age 7 and older as compared to their younger counterparts ages 2-6.

II. Perceptions of Children's Activities and Food or Drink Consumption

Recent public opinion polls show that most American adults think obesity is a serious problem for society, but most parents in the poll here are not concerned their own children

will become overweight as adults. A July 2012 poll from Gallup¹ shows that 81% of adults think that obesity is an extremely or very serious problem for society. By comparison, only 20% of children in this poll had a parent who was concerned that this child will be overweight as an adult.

Parents' assessments of their children's weight do not line up with national statistics.

According to their parents, three quarters of children (73%) are "about the right weight", 14% are "a little overweight" and only 1% are "very overweight." This contrasts with national data suggesting that 32% of children are overweight, including 17% who are obese.² Further, there is a disconnect between parents' assessments of the risk of future weight gain and national adult obesity rates. As mentioned above, for 20% of children, a parent is concerned they will be overweight as an adult, but it is estimated that 69% of adults are overweight, including 36% who are obese and an additional 6% who have "extreme obesity".³ Children perceived as overweight were much more likely to have that parent concerned about their weight than children who were perceived as currently "about the right weight" or underweight (57% vs. 14% and 9% respectively). This suggests that parents have a particularly hard time envisioning that their children who appear the appropriate weight to them now are nonetheless at risk for future problems. Additionally, nearly the same fraction of children have parents who believe they are underweight as overweight (12% and 15% respectively).

Parents who believe their child is overweight are concerned. Among children perceived as currently overweight, most (60%) have a parent who is somewhat or very concerned about their weight. Nonetheless, for the substantial minority of 40%, the parent is not very or not at all concerned.

In most cases, parents don't seem to believe that the way their child ate on a given day is likely to make them gain unhealthy weight. According to parents, 87% of children ate and drank in a way that helped maintain or achieve a healthy weight during the crunch time window of 3pm to bedtime on a given day. Very few parents felt their child had a large amount of foods or drinks that commonly lead to unhealthy weight gain, but nearly half of children (48%) were reported to have had at least some sweets like candy, cupcakes, cookies or ice cream; more than a quarter (27%) had potato, tortilla or corn chips; and one in five (18%) had fast food, like a burger, French fries or pizza. In most cases, the parent considered the amount of these items to be only a small amount.

¹ Poll by Gallup Organization, July 9 - July 12, 2012 and based on 1,014 telephone interviews. "How serious a problem do you think...obesity is to society--extremely serious, very serious, somewhat serious, or not serious?"

² <http://win.niddk.nih.gov/statistics/index.htm#b>

³ <http://www.cdc.gov/nchs/data/databriefs/db82.pdf>

III. Practices around the Family Dinner

Most children are in households where a parent says it is important that the family eats together, but for almost half (46%) this is difficult to do – largely because of work for the adults and extracurricular activities for the children. The busy schedule of American families appears to be cutting into family dinners together. Among the children whose families did not have dinner together the night prior to the poll, the top reason was that an adult was at work (50% of this group). Children's extracurricular activities (such as "participating in a team or club or taking music lessons") played a role for 27% of children who themselves had such activities and for 31% whose siblings did. In a little more than a tenth of cases (13%), the reason they did not have dinner together was that the child was with friends and for the same fraction (13%) a sibling was. In 17% of cases, an adult was at religious or community activities, and in a very small number of cases (3%) a child (14 years or older) was at work. In 17% of cases, the family had dinner in the same house but at least one family member ate in a different room.

The proportion of families who are eating together has not changed much in more than 20 years, but the family dinner itself may not be a shared meal around the kitchen table today. According to parents, nearly half of children are in families (48%) that ate together 6 or 7 nights out of the last week, while the rest are not. This figure has not changed much since 1990, when the proportion of households that had eaten together 6 or 7 nights in the last week was 54%.⁴ Thinking about a given night, 76% of children live in households where the family ate dinner together, but only 70% ate dinner together at home, and only 61% ate together at home around a table. Further, in only 55% of cases was the child at the table, sharing the same food. Research suggests a shared meal at a table appears to be associated with lower obesity rates because it may structure our eating habits and create positive norms around appropriate eating.⁵

Even among those who ate together at home, many were distracted by TV, cell phones, laptops or iPods. While 70% of children live in households where the family ate dinner together at home, 24% had the TV on during dinner or someone used a cell phone, a laptop or an iPod during dinner. This means only 46% of children live in households where the family ate together without these distractions. Research suggests that meals without distractions, particularly television, are associated with lower obesity rates.⁶

For many children, parents have rules about eating during family dinners that may be different than what experts now recommend. According to parents, a quarter of children who ate with the family the previous night were required to eat everything on their plate (25%). While such rules may be in place with the idea that they help the child, recent research suggests

⁴ Conducted by CBS News/New York Times, November 13 - November 15, 1990 and based on 1,370 telephone interviews. Subsample for analysis was households with children 0-17.

⁵ See: http://dev.srcprojecth.org/articles/family_table.pdf and <http://pediatrics.aappublications.org/content/early/2011/04/27/peds.2010-1440.full.pdf>

⁶ See: <http://pediatrics.aappublications.org/content/early/2011/04/27/peds.2010-1440.full.pdf> and http://library.mtsu.edu/reference/one_nfs.pdf

that requiring children to eat everything on their plate may encourage overeating.⁷ Parents also report that the adults in the family set limits on eating during the family dinner. For 45% of children at the family dinner, adults set limits on the types of food/drinks they had, and for 29%, there were limits on the amounts of food or drinks they had. Experts in the same Institute of Medicine report suggest that strong limits may not be effective and may, counter-intuitively, encourage children's preferences for sweeter foods or larger portions.

A modest fraction of children were involved in food decisions and preparation. The media has paid much attention to the idea that involving children in decisions about food and in food preparation is an important tool in fostering healthy eating habits, if not lower obesity rates.⁸ Some state public health organizations are also promoting this approach, as is First Lady, Michelle Obama, in her "Let's Move" national campaign to address childhood obesity.⁹ In this poll, nearly 4 in 10 children (38%) were involved in decisions about what to eat at the family dinner, while a quarter of children (25%) were involved in preparing their food for the family dinner.

V. Family Practices Around Restful Sleep

Ensuring their child gets sufficient sleep so s/he is well-rested is an important goal in nearly all families, but is difficult for many. Research suggests that sufficient sleep is an important component in maintaining a healthy weight for children.¹⁰ Nearly all children live with providers who say that "getting enough sleep so the child is well-rested" is important (96%), but more than 4 in 10 (43%) say it is difficult to do. That said, the vast majority of children (90%) have a certain time set for bedtime and, in total, two-thirds (67%) actually got to bed on time the night before the poll, according to parents. Most children (87%) were perceived the next day as having gotten enough sleep.

IV. Special Events in Families

Family events where foods that commonly lead to unhealthy weight gain, including those with "high fat or sugar content, like chips, fried foods, fast foods or sweets" are fairly common. According to parents, just under half of children (46%) attended such events at least monthly over the past year, and 96% of children attended them at least once.

Sizable shares of children live in households where foods and drinks that can lead to unhealthy weight gain are perceived as playing an important role in family events. Among children who had attended a family event with these foods in the past year (96%), approximately

⁷ See: http://www.nap.edu/openbook.php?record_id=11015&page=295

⁸ See: <http://www.webmd.com/a-to-z-guides/features/cooking-with-your-children>

⁹ See: <http://www.health.ny.gov/prevention/nutrition/resources/obparnts.htm> and <http://www.letsmove.gov/plan-healthy-meal>

¹⁰ See: Taheri, S. The link between short sleep duration and obesity: we should recommend more sleep to prevent obesity. Arch Dis Child. 2006 Nov;91(11):881-4.

half live in households where the parent feels that “family celebrations are a time to take a break from being concerned about eating in a way that can lead to unhealthy weight gain” (48%). Sizable shares of these children live in households where these foods are felt to be “an important part of family traditions” (39%) and where “it doesn’t feel like a celebration” without them (32%). More than a quarter of these children live in households where parents feel having these foods is “an important way [their family] shows affection” (27%).

Methodology

This poll is part of an on-going series of surveys developed by researchers at the Harvard Opinion Research Program (HORP) at the Harvard School of Public Health in partnership with the Robert Wood Johnson Foundation and NPR. The research team consists of the following members at each institution.

Harvard School of Public Health: Robert J. Blendon, Professor of Health Policy and Political Analysis and Executive Director of HORP; Gillian K. SteelFisher, Research Scientist and Assistant Director of HORP; Kathleen J. Weldon, Research and Administrative Manager; and Eran Ben-Porath of SSRS/ICR, an independent research company.

Robert Wood Johnson Foundation: Fred Mann, Associate Vice President, Communications; Debra Joy Pérez, Assistant Vice President, Research and Evaluation.

NPR: Anne Gudenkauf, Senior Supervising Editor, Science Desk and Joe Neel and Alison Richards, Deputy Senior Supervising Editors, Science Desk.

Results came from a poll conducted in the fall of 2012 among caregivers of children in their home. Care providers were primarily parents (87%), but also grandparents, siblings, aunts, uncles and foster parents. A randomly selected child from that household was the focus of questions, and care providers were screened for being able to answer questions about what that child had done the previous day in order to prevent biases in the estimates of children's activities and consumption. Interviews were conducted Tuesday through Saturday so that respondents answered questions about the Monday-Friday work/school week. The poll was based on a nationally representative sample of households with children ages 2-17, developed from a randomized telephone sample (including both landline and cell phones).

The primary poll was conducted October 11 to November 21, 2012, among a total of 1,018 caregivers. The question about reasons for families not eating together (Question series 13ba-h) was asked as part of a follow-up poll conducted December 12 to 22, 2012, among a total of 264 caregivers. For the October/November portion of the poll, the margin of error for total households is +/-4.1 percentage points at the 95% confidence level. For the December follow-up, the margin of error for total households is +/-8.25 percentage points at the 95% confidence level. In both cases, interviews were conducted by SSRS/ICR of Media (PA).

Possible sources of non-sampling error include non-response bias, as well as question wording and ordering effects. Non-response in telephone surveys produces some known biases in survey-derived estimates because participation tends to vary for different subgroups of the population. To compensate for these known biases and for variations in probability of selection within and across households, sample data are weighted by household size and composition, homeownership, cell phone/landline use and demographics of the child (sex, age, race/ethnicity, metro status and census region) to reflect the true population of children in the country. Other techniques, including random-digit dialing, replicate subsamples, and systematic respondent selection within households, are used to ensure that the sample is representative.

NPR is an award-winning, multimedia news organization that reaches 27 million listeners each week, and nearly 23 million people monthly on digital platforms. In collaboration with more than 900 independent public radio stations nationwide, NPR strives to provide the public with a deeper understanding and appreciation of events, ideas and cultures. To find local stations and broadcast times, visit www.npr.org/stations

The Robert Wood Johnson Foundation focuses on the pressing health and health care issues facing our country. As the nation's largest philanthropy devoted exclusively to improving the health and health care of all Americans, the Foundation works with a diverse group of organizations and individuals to identify solutions and achieve comprehensive, meaningful and timely change. For nearly 40 years the Foundation has brought experience, commitment, and a rigorous, balanced approach to the problems that affect the health and health care of those it serves. When it comes to helping Americans lead healthier lives and get the care they need, the Foundation expects to make a difference in your lifetime. For more information, visit www.rwjf.org. Follow the Foundation on Twitter www.rwjf.org/twitter or Facebook www.rwjf.org/facebook.

Harvard School of Public Health is dedicated to advancing the public's health through learning, discovery and communication. More than 400 faculty members are engaged in teaching and training the 1,000-plus student body in a broad spectrum of disciplines crucial to the health and well-being of individuals and populations around the world. Programs and projects range from the molecular biology of AIDS vaccines to the epidemiology of cancer; from risk analysis to violence prevention; from maternal and children's health to quality of care measurement; from health care management to international health and human rights. For more information on the school, visit www.hsph.harvard.edu.