



Why family dinner?

What if there was one change you could make to improve your kids' vocabulary, resilience and self-esteem, while decreasing their likelihood of eating disorders, teen pregnancy and substance abuse? What if just one change could boost their physical, social-emotional and academic development?

Children who regularly eat dinner with their families show:

Physical benefits

- Greater consumption of vital nutrients from fruits and vegetables and less soda consumption
- Lower rates of obesity
- Lower caloric intake, associated with home cooking as compared to restaurant equivalents
- Better cardiovascular health in teenagers
- Reduction of asthma symptoms
- Greater likelihood of eating healthier diets when they're on their own as young adults
- Greater likelihood of not being obese as young adults

Social-emotional benefits

- Higher self-esteem, resilience and a more positive outlook on the future
- Lower rates of substance abuse, teen pregnancy, behavioral problems in school, and depression
- Better able to bounce back from cyberbullying
- Better body image
 - Having 5 or more family meals per week lowered girls' risk of developing an eating disorder by 30%.
 - A survey of almost 5,000 ethnically diverse adolescents found that teens who had regular family dinner had less disordered eating, particularly related to dieting and binge eating

Academic benefits

- Better grades
 - A Center on Addiction and Substance Abuse (CASA) study found that adolescents who ate dinner with their families (3 to 5 times per week) were twice as likely to get As in school compared to classmates who rarely ate dinner with family.
- Ability to have complex conversations
- Conversation at table is greater vocabulary enhancer in preschoolers than reading aloud to them
- Higher reading scores in school-aged children



But in spite of all these benefits, many families are not eating together:

- 90% of parents say that family dinners are important for the health and welfare of their kids
- 20% of meals are eaten in the car
- From 1999 to 2010, the percentage of low income youth eating dinner together 5 or more times a week decreased from 47% to 39%. Among higher income families there was an increase from 56% to 61% during that same decade. In general, about 50% of American families are having regular family dinners
- An average of 70% of meals are eaten out of the home
- 69% of Americans report that some other activity is competing with the typical family dinner, particularly watching television and 58% of Americans report some type of technology or entertainment-related distraction

Interested in learning more about the benefits of family dinner? Check out these resources:

Bakalar, N. (2014). Family Meals May Mean a Healthier Weight [Web log post]. Retrieved from http://well.blogs.nytimes.com/2014/10/08/family-meals-may-mean-a-healthier-weight/?_php=true&_type=blogs&_r=0

This New York Times article reports on a longitudinal study completed by a group of doctors and nutritionists, originally published in the Journal of Pediatrics. The study examined “whether having family meals as an adolescent protects against becoming overweight or obese 10 years later as a young adult.” Researchers surveyed the eating habits of 2,287 girls and boys in their teenage years, and then followed up 10 years later, when 51 percent were overweight and 22 percent were obese.

After controlling for sex, age, race, socioeconomic status and initial body mass index, they found that, compared with those who never had family meals, those who ate with their family three to four times a week were about half as likely to be overweight.

Berge, J. M., Rowley, S., Trofholz, A., Hanson, C., Rueter, M., MacLehose, R. F., & Neumark-Sztainer, D. (2014). Childhood obesity and interpersonal dynamics during family meals. *Pediatrics*, 134(5), 923-932. doi:10.1542/peds.2014-1936. Retrieved from <http://ohioaap.org/wp-content/uploads/2015/08/Pediatrics-2014-Berge-peds.2014-1936.pdf>

Family meals have been found to be associated with a number of health benefits for children; however, associations with obesity have been less consistent, which raises questions about the specific characteristics of family meals that may be protective against childhood obesity. The current study examined associations between interpersonal and food-related family dynamics at family meals and childhood obesity status.

Significant associations were found between positive family and parent-level interpersonal dynamics (ie, warmth, group enjoyment, parental positive reinforcement) at family meals and reduced risk of childhood



overweight. In addition, significant associations were found between positive family- and parent-level food-related dynamics (ie, food warmth, food communication, parental food positive reinforcement) and reduced risk of childhood obesity.

Results extend previous findings on family meals by providing a better understanding of interpersonal and food-related family dynamics at family meals by childhood weight status. Findings suggest the importance of working with families to improve the dyadic and family-level interpersonal and food-related dynamics at family meals.

Berge, J. M., Wall, M., Hsueh, T., Fulkerson, J. A., Larson, N., & Neumark-Sztainer, D. (2015). The protective role of family meals for youth obesity: 10-year longitudinal associations. *The Journal of Pediatrics*, 166(2), 296-301. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4308550/>

Data from Project Eating and Activity in Teens -III, a longitudinal cohort study with emerging young adults, were used. At baseline (1998-1999), adolescents completed surveys in middle or high schools, and at 10-year follow-up (2008-2009) surveys were completed online or via mailed surveys. Young adult participants were racially/ethnically and socioeconomically diverse between the ages of 19 and 31 years. Logistic regression was used to associate weight status at follow-up with family meal frequency 10 years earlier during adolescence, controlling and testing for interactions with demographic characteristics.

All levels of baseline family meal frequency (ie, 1-2, 3-4, ≥ 5 family meals/wk) during adolescence were significantly associated with reduced odds of overweight or obesity 10 years later in young adulthood compared with never having family meals as an adolescent. Interactions by race indicated that family meals had a stronger protective effect for obesity in black vs white young adults.

Family meals during adolescence were protective against the development of overweight and obesity in young adulthood. Professionals who work with adolescents and parents may want to strategize with them how to successfully carry out at least 1 to 2 family meals per week in order to protect adolescents from overweight or obesity in young adulthood.

Berge, J. M., Wall, M., Larson, N., Loth, K. A., & Neumark-Sztainer, D. (2012). Family Functioning: Associations with Weight Status, Eating Behaviors, and Physical Activity in Adolescents. *J Adolesc Health*, 52(3), 351-357. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3580029/>

Data are from EAT 2010 (Eating and Activity in Teens), a population-based study that assessed eating and activity among socioeconomically and racially/ethnically diverse youth. Adolescents completed anthropometric assessments and surveys at school in 2009–2010. Multiple linear regression was used to test the relationship between family functioning and adolescent weight, dietary intake, family meal patterns, and physical activity. Additional regression models were fit to test for interactions by race/ethnicity.

For adolescent girls, higher family functioning was associated with lower body mass index z-score and percent overweight, less sedentary behavior, higher intake of fruits and vegetables, and more frequent family meals and breakfast consumption. For adolescent boys, higher family functioning was associated with more physical activity, less sedentary behavior, less fast food consumption, and more frequent family meals and breakfast



consumption. There was one significant interaction by race/ethnicity for family meals; the association between higher family functioning and more frequent family meals was stronger for non-white boys compared to white boys. Overall, strengths of associations tended to be small with effect sizes ranging from - 0.07 to 0.31 for statistically significant associations.

Findings suggest that family functioning may be protective for adolescent weight and weight-related health behaviors across all race/ethnicities, although assumptions regarding family functioning in the homes of overweight children should be avoided given small effect sizes.

Berge, J. M., Truesdale, K. P., Sherwood, N. E., Mitchell, N., Heerman, W. J., Barkin, S., Matheson, D., Ievers-Landis, C. E., & French, S. A. (2018). Beyond the Dinner Table: Who's Having Breakfast, Lunch, and Dinner Family Meals and Which Meals are Associated with Better Preschool Children's Diet Quality and BMI?. *Public Health Nutrition*, 20(18), 3275-3284. Retrieved from <https://europepmc.org/article/med/28903804>

Cross sectional baseline data (2012-2014) from two randomized controlled childhood obesity prevention trials, NET-Works and GROW, were analyzed together. Studies were carried out in community and in-home settings in urban areas of Minnesota and Tennessee. Parent-child pairs from Minnesota and Tennessee participated in the study.

Over 80% of families ate breakfast or lunch family meals at least once per week. Over 65% of families ate dinner family meals ≥ 5 times/week. Frequency of breakfast family meals and total weekly family meals were significantly associated with healthier diet quality for non-Hispanic preschool children ($p < 0.05$), but not for Hispanic children. Family meal frequency by meal type was not associated with BMI percentile for non-Hispanic or Hispanic preschool children.

Breakfast family meal frequency and total weekly family meal frequency was associated with healthier diet quality in non-Hispanic preschool children but not in Hispanic children. Longitudinal research is needed to clarify the association between family meal type and child diet quality and BMI percentile.

Brunstrom, J. M., & Mitchell G. M. (2006). Effects of distraction on the development of satiety. *British Journal of nutrition*, 96(4), 761-769. Retrieved from https://www.cambridge.org/core/services/aop-cambridge-core/content/view/6B1F7EA390C755A49FF0BE2A442E3C5A/S0007114506002893a.pdf/effects_of_distraction_on_the_development_of_satiety.pdf

Two experiments explored the hypothesis that distraction causes a reduced sensitivity to the physiological and sensory cues that signal when to terminate a meal. In Experiment 1, eighty-eight females ate five 'Jaffa Cakes' either while distracted by a computer game or while sitting in silence. Analysis of the difference in rated hunger, fullness and desire to eat (pre- to post-intake) revealed that distracted participants experienced smaller changes in their desire to eat and fullness than did non-distracted participants. Experiment 2 assessed whether changes in ratings are attenuated because sensory-specific satiety (or a related process) fails to develop.

Using a similar procedure, eighty-four females provided desire to eat, pleasantness and intensity ratings for Jaffa Cakes and for two 'uneaten' foods, both before and at three time-points after consuming five Jaffa Cakes. Non-distracted participants reported a reduction in their desire to eat the eaten food relative to the uneaten



food (food-specific satiety), whereas distracted participants maintained a desire to eat all foods. Moreover, this difference between distracted and non-distracted participants was evident 5 and 10 min after the eating episode had terminated. The present findings invite speculation that distraction attenuates the development of sensory-specific satiety, and that this effect persists (at least for a brief period) after the distractor has terminated. More generally, this kind of phenomenon warrants further scrutiny because it holds the potential to contribute towards overeating, either by prolonging an eating episode or by reducing the interval between meals.

Chu, Y. L., Farmer, A., Fung, C., Kuhle, S., Storey, K. E., & Veugelers, P. J. (2012). Involvement in home meal preparation is associated with food preference and self-efficacy among Canadian children. *Public Health Nutrition*, 16(1), 108-112. DOI: [10.1017/S1368980012001218](https://doi.org/10.1017/S1368980012001218). Retrieved from https://www.cambridge.org/core/services/aop-cambridge-core/content/view/C4347E7475C945893A82B19E5F93CC90/S1368980012001218a.pdf/involvement_in_home_meal_preparation_is_associated_with_food_preference_and_selfefficacy_among_canadian_children.pdf

A cross-sectional survey design was used. Children were asked how often they helped prepare food at home and rated their preference for twelve fruits and vegetables on a 3-point Likert-type scale. Self-efficacy was measured with six items on a 4-point Likert-type scale asking children their level of confidence in selecting and eating healthy foods at home and at school.

A large majority (83-93 %) of the study children reported helping in home meal preparation at least once monthly. Higher frequency of helping prepare and cook food at home was associated with higher fruit and vegetable preference and with higher self-efficacy for selecting and eating healthy foods.

Encouraging children to be more involved in home meal preparation could be an effective health promotion strategy. These findings suggest that the incorporation of activities teaching children how to prepare simple and healthy meals in health promotion programmes could potentially lead to improvement in dietary habits.

Coulthard H., & Thakker, D. (2015). Enjoyment of tactile play is associated with lower food neophobia in preschool children. *Journal of the Academy of Nutrition and Dietetics*, 115(7), 1134-1140.

Previous research has shown that parental reports of food neophobia and tactile sensitivity are associated with lower fruit and vegetable (F/V) intake in children. This study aimed to pilot a behavioral observation measure of tactile play in young children. The primary aim of the study was to see whether children's enjoyment of tactile play was associated with higher F/V consumption, as well as lower food neophobia. Seventy 2- to 5-year-old children (37 males and 33 females) and their parents were recruited through children's centers in the Leicester region of the United Kingdom during July to October 2012. Children's engagement in two tactile play tasks using sticky foods (mashed potatoes and vegetarian gelatin) was observed and rated by both the researcher and parent. Parents were asked to complete a series of questionnaires measuring F/V consumption, food neophobia, and sensory processing.

It was found that lower child food neophobia was significantly related to enjoyment of tactile play, whereas child F/V consumption was associated with parental F/V consumption, but not enjoyment of tactile play. The



findings strengthen the idea that tactile processing may be associated with the acceptance of food variety, but not the total amount of F/V consumed. Additional research is indicated to determine whether tactile play tasks can be used to lower child food neophobia.

Coon, K. A., Goldberg, J., Rogers, B. L., & Tucker, K. L. (2001). Relationships between use of television during meals and children's food consumption patterns. *Pediatrics*, 107(1), E7.

This Tufts University School of Nutrition study surveyed 91 parent-child pairs from suburban neighborhoods in Washington, DC regarding food consumption patterns and frequency of television viewing during mealtimes. Children surveyed were in grades 4, 5 and 6.

Children from families with high television use consumed an average of 6% more of their total daily energy intake from meats; 5% more from pizza, salty snacks, and soda; and nearly 5% less of their energy intake from fruits, vegetables, and juices than did children from families with low television use. Associations between television and children's consumption of food groups remained statistically significant in multiple linear regression models that controlled for socioeconomic factors.

*The study concludes that "the dietary patterns of children from families in which television viewing is a normal part of meal routines may include **fewer fruits and vegetables and more pizzas, snack foods, and sodas** than the dietary patterns of children from families in which television viewing and eating are separate activities."*

Dallacker, M., Hertwig, R., & Mata, J. (2019). Quality Matters: A Meta-Analysis on Components of Healthy Family Meals. *Health Psychology*, 38(12), 1137-1149. doi:10.1037/hea0000801.

A greater frequency of family meals is associated with better diet quality and lower body mass index (BMI) in children. However, the effect sizes are small, and it remains unclear which qualitative components of family meals contribute to these positive health outcomes. This meta-analysis synthesizes studies on social, environmental, and behavioral attributes of family meals and identifies components of family meals that are related to better nutritional health in children.

Positive associations consistently emerged between 5 components and children's nutritional health: turning the TV off during meals ($r = .09$), parental modeling of healthy eating ($r = .12$), higher food quality ($r = .12$), positive atmosphere ($r = .13$), children's involvement in meal preparation ($r = .08$), and longer meal duration ($r = .20$). No moderating effects were found.

How a family eats together shows significant associations with nutritional health in children. Randomized control trials are needed to further verify these findings. The generalizability of the identified mealtime components to other contexts of social eating is also discussed. (PsycINFO Database Record (c) 2019 APA, all rights reserved).



Duke, M., Fivush, R., Lazarus, A., & Bohanek, J. (2003). Of Ketchup and Kin: Dinnertime Conversations as a Major Source of Family Knowledge, Family Adjustment, and Family Resilience. *The Emory Center for Myth and Ritual in American Life*, 26. Retrieved from

<http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.470.2126&rep=rep1&type=pdf>

Published by The Emory Center for Myth and Ritual in American Life, this paper discusses the changes in American family behavior patterns (70% of meals are eaten out of the home and on average, less than 33% of American families eat together more than two times per week), and the ways in which shared meals and conversation can strengthen family resilience.

The authors' main "concern" is with pinpointing what else is "lost with the loss of the family mealtime." Referencing Hofferth (1999, 2002) "the single strongest predictor of academic achievement scores and low rates of behavioral problems was amount of home-based family meal time." The paper concludes that "Eating together surely is a good thing."

The authors' goal is to "establish family patterns of communication that may buffer children from the difficulties of navigating the teenage years." The authors' initial findings show that children who have knowledge of their family history are more likely to have higher levels of self-esteem.

Eck, K. M., Spaccarotella, K., Delaney, C. L., Olfert, M. D., Shelnutt, K. P., Byrd-Bredbenner, C. (2018). "It's Making Memories": A Qualitative Investigation of Family Mealtime Cognitions, Barriers, and Strategies for Success of Parents and School-aged Kids. *Journal of Childhood Obesity*, 3(3), S2:006. Retrieved from <https://childhood-obesity.imedpub.com/its-making-memories-a-qualitative-investigation-of-family-mealtime-cognitions-barriers-and-strategies-for-success-of-parents-and-s.pdf>

Family meals, particularly those occurring in calm environments, are associated with numerous health benefits for both children and parents. However, families often struggle to share meals, with the frequency declining as kids get older. This qualitative research study aimed to explore the factors influencing family meal behaviors.

Content analysis results indicate that parents and children believed family meals were important, promoted communication, and strengthened family bonds. Parents and children reported that a calm, enjoyable, conflict-free mealtime environment bolstered mealtime enjoyment and increased the likelihood of regular family meals. Busy schedules were the greatest barrier to family meals identified by children and parents. strategies for overcoming barriers to family meals identified by parents were similar to those shared by kids and included keeping mealtime conversations positive, altering schedules to accommodate family mealtime, planning ahead, using time saving strategies and recruiting kids to help with meal preparation.

This qualitative research study provides novel insights into parents' and school-age children's cognitions (e.g., beliefs, attitudes), barriers, and facilitators related to family meals. Consideration of these insights during the development of nutrition education interventions has the potential to improve intervention effectiveness in increasing family meal frequency.



Eisenberg, M. E., Neumark-Sztainer, D., Fulkerson, J. A., & Story, M. (2008). Family meals and substance abuse: Is there a long-term protective association?. *Journal of adolescent health, 43*(2), 151-145.

During this study, 806 Minnesota adolescents were first surveyed between 1998 and 1999. The mean age of those surveyed was 12.8. The students were surveyed again by mail, in 2003-2004, when their mean age was 17.2 years. Logistic regression was used to estimate rates of tobacco, alcohol and marijuana use for teens reporting regular family meals at baseline, compared to those who do not have regular family means.

Family meal frequency (at baseline) was associated with significantly lower rates of cigarette smoking, alcohol use, and marijuana use among female teens. Family meals were not associated with use of any substance for male teens.

From the study: "Results from this study suggest that regular family meals in adolescence may have a long-term protective association with the development of substance use over 5 years among females. Parents should be encouraged to establish a pattern of regular family meals, as this activity may have long lasting benefits."

Eisenberg, M. E., Olson, R., Neumark-Sztainer, D., Story, M., Bearinger, L. H. (2004). Correlations between family meals and psychosocial well-being among adolescents. *Archives of Pediatrics and Adolescent Medicine, 158*(8), 792-796. Retrieved from <https://jamanetwork.com/journals/jamapediatrics/fullarticle/485781>
Researchers from the University of Minnesota, Minneapolis Schools of public Health, Medicine and Nursing completed this study to investigate an association between frequency of family meals and indicators of adolescent health and well-being (tobacco, alcohol, and marijuana use; academic performance; self-esteem; depressive symptoms; and suicide involvement).

Data was collected from a 1998-1999 school-based survey of 4746 adolescents from ethnically and socioeconomically diverse communities in the Minneapolis/St Paul, Minn, metropolitan area. Approximately one quarter (26.8%) of respondents ate 7 or more family meals in the past week, and approximately one quarter (23.1%) ate family meals 2 times or less. According to the study, "frequency of family meals was inversely associated with tobacco, alcohol, and marijuana use; low grade point average; depressive symptoms; and suicide involvement after controlling for family connectedness."

This study suggests that eating family meals may enhance the health and well-being of adolescents, and recommends public education about the benefits of family meals.



Elgar, F., Napoletano, A., Saul, G., Dirks, M., Craig, W., Poteat, V. P., Holt, M., & Koenig, B. W. (2014). Cyberbullying victimization and mental health in adolescents and the moderating role of family dinner. *JAMA Pediatrics*, *168*, 1015-1022. Retrieved from <https://jamanetwork.com/journals/jamapediatrics/fullarticle/1900477>

This study presents evidence that cyberbullying victimization relates to internalizing, externalizing, and substance use problems in adolescents and that the frequency of family dinners attenuate these associations.

This cross-sectional, observational study used survey data on 18,834 students (aged 12-18 years) from 49 schools in a Midwestern US state. Logistic regression analysis tested associations between cyberbullying victimization and the likelihood of mental health and substance use problems. Negative binomial regression analysis tested direct and synergistic contributions of cyberbullying victimization and family dinners on the rates of mental health and substance use problems.

Cyberbullying relates to mental health and substance use problems in adolescents, even after their involvement in face-to-face bullying is taken into account. Although correlational, these results suggest that family dinners (ie, family contact and communication) are beneficial to adolescent mental health and may help protect adolescents from the harmful consequences of cyberbullying.

Faith, M. S., Scanlon, K. S., Birch, L. L., Francis, L. S., & Sherry, B. (2004). Parent-child feeding strategies and their relationships to child eating and weight status. *Obesity Research*, *12*(11), 1711-1722. Retrieved from <https://onlinelibrary.wiley.com/doi/full/10.1038/oby.2004.212>

Parental feeding styles may promote overeating or overweight in children. A comprehensive literature review was undertaken to summarize the associations between parental feeding styles and child eating and weight status. Twenty-two studies were identified. We systematically coded study attributes and outcomes and tested for patterns of association. Nineteen studies (86%) reported at least one significant association between parental feeding style and child outcome, although study methodology and results varied considerably. Studies measuring parental feeding restriction, as opposed to general feeding control or another feeding domain, were more likely to report positive associations with child eating and weight status. Certain associations differed by gender and by outcome measurement (e.g., rate of eating as opposed to total energy intake). Parental feeding restriction, but no other feeding domain, was associated with increased child eating and weight status. Longitudinal studies are needed to test underlying causal pathways, including bidirectional causal models, and to substantiate findings in the presence of other obesity risk factors.

Fiese, B. H., & Schwartz, M. (2008). Reclaiming the family table: Mealtimes and child health and wellbeing. *Social Policy Report*, *22*(4), 3-20. Retrieved from <https://files.eric.ed.gov/fulltext/ED521697.pdf>

This social policy report provides a comprehensive overview of current research suggesting that frequency of family mealtimes, family climate during shared mealtimes, environmental and policy influences on family food



choice are related both directly and indirectly with children's health and wellbeing. It references a number of studies about the benefits of family mealtimes, most of which are also included in this bibliography.

The report includes a user-friendly list of "policies and practices to promote and support family meals." Recommendations include: shifting food culture in schools and at childcare facilities; families instituting media-free meal times, and increased media literacy instruction in schools; increased attention to family meal frequency by health care providers; enhancing food policy programs to decrease rates of food insecurity.

The report also includes a description of the "ABC's (Activities, Behaviors, Communication) Of Family Mealtimes Across Developmental Periods" as well as a list of barriers to family mealtimes (shopping time, schedules, etc), and helpful suggestions for families that faces these common challenges.

Fiese, B. H., Winter, M. A., Wamboldt, F. S., Anbar, R. D., & Wamboldt, M. Z. (2010). Do family mealtime interactions mediate the association between asthma symptoms and separation anxiety?. *Journal of Child Psychology and Psychiatry*, 51(2), 144-151.

Respiratory problems have been shown to be associated with the development of panic anxiety. Family members play an essential role for children to emotionally manage their symptoms. This study aimed to examine the relation between severity of respiratory symptoms in children with asthma and separation anxiety. Relying on direct observation of family interactions during a mealtime, a model is tested whereby family interactions mediate the relation between asthma severity and separation anxiety symptoms.

Sixty-three children (ages 9-12 years) with persistent asthma were interviewed via the Diagnostic Interview Schedule for Children IV; family interactions were assessed via direct observation of a mealtime; primary caregivers completed the Childhood Asthma Severity Scale; youth pulmonary function was ascertained with pre- and post-bronchodilator spirometry; adherence to asthma medications was objectively tracked for six weeks.

Poorer pulmonary function and higher functional asthma severity were related to higher numbers of separation anxiety symptoms. Controlling for medication adherence, family interaction patterns mediated the relationship between poorer pulmonary function and child separation anxiety symptoms.

Family mealtime interactions may be a mechanism by which respiratory disorders are associated with separation anxiety symptoms in children, potentially through increasing the child's capacity to cognitively frame asthma symptoms as less threatening, or through increasing the child's sense of security within their family relationships.

Fiese, B. H., Winter, M. A., & Botti, J. C. (2011). The ABCs of family mealtimes: Observational lessons for promoting healthy outcomes for children with persistent asthma. *Child Development*. 82(1), 133-145.

Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3058371/>

This observational study of 200 family mealtimes examined the relation between child health indicators in a group of children with persistent asthma and three dimensions of mealtime interaction: Action, Behavior

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Control, and Communication. Children in the study were aged 5 to 12, and each had an asthma diagnosis of at least one year, had been prescribed daily asthma controller medication for at least six months, and were not diagnosed with another chronic medical condition that required daily medication.

Percent of time spent in Action and Positive Communication varied by asthma symptom severity and child quality of life as well as family socio-demographic factors, including maternal education, child ethnicity, and family structure. Controlling for maternal education and overall general family functioning revealed that positive communication during family mealtimes predicted child quality of life.

This study concludes by offering guidance for practitioners and policymakers toward promoting healthy family mealtimes as a public health priority. Recommendations include: better food labeling, access to healthy foods in low income neighborhoods, public service announcements promoting healthy family mealtimes, and support for education programs.

Fishel, A. K. (2015). *Home for Dinner: Mixing Food, Fun, and Conversation for a Happier Family and Healthier Kids*. New York, NY: Amacom.

Kids need more than food. They're starving for family dinners. Sports, activities, long hours, and commutes—with so much to do, dinner has been bumped to the back burner. But research shows that family dinners offer more than just nutrition. Studies have tied shared meals to increased resiliency and self-esteem in children, higher academic achievement, a healthier relationship to food, and even reduced risk of substance abuse and eating disorders. Written by a Harvard Medical School professor and mother, Home for Dinner makes a passionate and informed plea to put mealtime back at the center of family life and supplies compelling evidence and realistic tips for getting even the busiest of families back to the table.

Food Marketing Institute Foundation. (2017). Desires, Barriers and Directions for Shared Meals at Home. Retrieved from https://www.fmi.org/docs/default-source/familymeals/fmi-power-of-family-meals-whitepaper-for-web.pdf?sfvrsn=13d87f6e_2

American families want to eat at home together more often. They appreciate the social, emotional, healthful and financial benefits of family meals at home. However, food shoppers say they find it difficult to achieve family meals as often as they would like. Breakfasts and lunches have become routinely solitary or away-from-home experiences. Even at dinner, the most family-centric occasion in American eating culture, families face practical barriers, cultural headwinds and a food landscape that has yet to catch up fully with their fundamental needs. As many as half of all dinners are either eaten alone, eaten away from home or skipped altogether, leaving families searching for solutions. Families themselves have been changing, outpacing cultural support for shared eating routines.

Grocery store shoppers (N=211 shoppers who live alone, N=519 live with other adult only, N=354 live with children) were surveyed regarding their stances on meals and general shopping trends. Of the shoppers with children, the study found that dinner is the most consistent and social of all meals. For households with adults



living with children and adults living together, differing schedules is the largest obstacle for family dinners. The steps that most parents are taking to eat with kids more often is serving meals that they know their children will enjoy and making sure everyone is home at dinnertime.

Frank, D. L., Thompson, D., Affenito, S. G., Barton, B. A., & Striegel-Moore, R. H. (2008). What mediates the relationship between family meals and adolescent health issues?. *Health Psychology, 27*(2), S109-S117.

Completed by a group of psychologists, this study used longitudinal data to develop a conclusion about the relationship between frequency of family meals and health outcomes. Data were obtained from the National Heart, Lung, and Blood Institute Growth and Health Study (NGHS), a 10-year longitudinal study of 2,379 black and white girls assessed annually from ages 9-19.

“More frequent family meals in the first 3 study years predicted greater family cohesion and problem- and emotion-focused coping in Years 7 and 8. Family cohesion mediated family meals and risk of smoking in Year 10. Problem-focused coping mediated family meals and both stress and disordered eating-related attitudes and behaviors in Year 10.” The study concludes that eating together as a family in early years may lead to positive health outcomes later in life.

Fulkerson, J. A., Pasch, K. E., Stigler, M. H., Farbaksh, K., Perry, C. L., & Komro, K. A. (2010). Longitudinal associations between family dinner and adolescent perceptions of parent-child communication among racially diverse urban youth. *Journal of Family Psychology, 24*(3), 261-270. Retrieved from <http://europepmc.org/article/MED/20545399>

Researchers from University of Minnesota, Twin Cities, School of Nursing completed this study, in which 5812 students completed at least one of four surveys. The cohort follow-up rate from the beginning of 6th grade to the end of 8th grade was 61%. Study participants were equally split by gender. The sample was predominantly African American (51%) and Latino (34%), followed by Caucasian (15%). Many participants (70%) received free- or reduced-price lunch. About half of participants reported living with two parents; 41% reported living with mother mostly, father mostly, or equally with mother and father; and 9% reported living with other parent(s)/guardian(s)

The findings of the study suggest that “that families with teenagers may enhance parent-child communication and could ultimately promote healthy adolescent development by making family meals a priority.”

Fulkerson, J. A., Kubik, M. Y., Story, M., Lytle, L., & Arcan, C. (2009). Are there nutritional and other benefits associated with family meals among at-risk youth?. *Journal of Adolescent Health, 45*(4), 389-395. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3246800/>

This study builds upon previous work and literature, in which positive associations have been determined between frequency of family meals and healthy dietary behaviors and psychological well-being, as well as the

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relationship between family dinner frequency and rates of overweight status among adolescents. This study examines a specific population of teens at-risk of academic failure, to see if the broader findings can be applied to this group.

From the study: “A racially diverse sample of adolescents (n = 145, 52% male, 61% nonwhite) from six alternative high schools (AHS) completed surveys and had their heights and weights measured by trained research staff. Mixed-model logistic regression analyses assessed associations between family dinner frequency and overweight status, healthy and unhealthy weight management, and food insecurity.”

This study’s results indicate that family dinner frequency was positively associated with breakfast consumption and fruit intake, and inversely associated with depressive symptoms. Adolescents who reported never eating family dinner were significantly more likely to be overweight and food insecure than adolescents who reported five to seven family meals per week.

Overall, this study found that some, but not all of the benefits found in other studies were true for the at-risk sample of youth. The study recommends that intervention programs to increase the availability of healthy foods and to promote family meals may be beneficial.

Fulkerson, J., Nemark-Sztainer, D., & Story, M. (2006). Adolescent and parent views of family meals. *Journal of the American Dietetic Association*, 106(4), 526-532. Retrieved from <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.598.1831&rep=rep1&type=pdf>

Adolescents completed a school-based survey and parents participated in a telephone interview as part of Project EAT (Eating Among Teens). Participants were 902 adolescent females (n=424) and males (n=478) and one of their guardians/parents.

Parents were more likely than adolescents to report eating five or more family meals per week, the importance of eating together, and scheduling difficulties. Younger adolescents were more likely than older adolescents to report eating five or more family meals per week, higher importance of eating together, and more rule expectations at mealtime, whereas older adolescents were more likely to report schedule difficulties. Girls reported more family meals per week and more scheduling conflicts than boys did; boys reported more rules at mealtime than girls did.

Family meals are perceived positively by both adolescents and parents. Family meals may be a useful mechanism for enhancing family togetherness, and for role modeling behaviors that parents would like their children to emulate. Dietetics professionals can capitalize on positive attitudes toward family meals to help promote their frequency. Helping families learn to cook healthful, quick meals may reduce dependency on less healthful meal options, reduce the frequency of eating outside of the home, and promote greater nutritional intake.



Fulkerson, J., Story, M., Mellin, A., Leffert, N., Neumark-Sztainer, D., & French, S. (2006). Family dinner meal frequency and adolescent development: Relationships with developmental assets and high-risk behaviors. *Journal of Adolescent Health, 39*(3), 337-345. Retrieved from [https://www.jahonline.org/article/S1054-139X\(05\)00577-X/pdf](https://www.jahonline.org/article/S1054-139X(05)00577-X/pdf)

Anonymous surveys were distributed to 99,462 sixth to 12th grade students from public and alternative schools in 213 cities and 25 states across the United States. Logistic regression analyses tested differences in assets and high-risk behaviors by family dinner frequency.

The findings of the present study suggest that the frequency of family dinner is an external developmental asset or protective factor that may curtail high-risk behaviors among youth. Creative and realistic strategies for enhancing and supporting family meals, given the context within which different families live, should be explored to promote healthy adolescent development. Family rituals such as regular mealtimes may ease the stress of daily living in the fast-paced families of today's society.

Gable, S., Chang, Y., & Krull, J. L. (2007). Television watching and frequency of family meals are predictive of overweight onset and persistence in a national sample of school-age children. *Journal of the American Dietetic Association, 107*(1), 53-61.

Children who watched more television (odds ratio [OR] 1.02) and ate fewer family meals (OR 1.08) were more likely to be overweight for the first time at spring semester of third grade. Children who watched more television (OR 1.03), ate fewer family meals (OR 1.08), and lived in neighborhoods perceived by parents as less safe for outdoor play (OR 1.32) were more likely to be persistently overweight. Child aerobic exercise and opportunities for activity were not associated with a greater likelihood of weight problems.

Conclusions: This study supports theories regarding the contributions of television watching, family meals, and neighborhood safety to childhood weight status. When working with families to prevent and treat childhood weight problems, food and nutrition professionals should attend to children's time spent with screen media, the frequency of family mealtimes, and parents' perceptions of neighborhood safety for children's outdoor play.

Gillman, M. W., Rifas-Shiman, S. L., Frazier, L., Rockett, H. R. H., Camargo, C. A., Field, A. E., Berkey, C. S., & Colditz, G. A. (2000). Family Dinner and Diet Quality Among Older Children and Adolescents. *Family Medicine, 9*(3), 235-240. Retrieved from https://triggered.edina.clockss.org/ServeContent?rft_id=info:doi/10.1001/archfami.9.3.235

Approximately 17% of participants ate dinner with members of their family never or some days, 40% on most days, and 43% every day. More than half of the 9-year-olds ate family dinner every day, whereas only about one third of 14-year-olds did so. In age- and sex-adjusted logistic regression models, the odds ratios associated with a frequency of family dinner of most days compared with never or some days, or every day compared with



most days, were as follows: for eating at least 5 servings per day of fruits and vegetables, 1.45 (95% confidence interval [CI], 1.37-1.53); for eating any fried foods away from home, 0.67 (95% CI, 0.64-0.70); and for drinking any soda, 0.73 (95% CI, 0.66-0.80). Multiple linear regression showed that an increased frequency of family dinner was also associated with substantially higher intake of several nutrients, including fiber, calcium, folate, iron, vitamins B6, B12, C, and E; lower glycemic load; and lower intake of saturated and trans fat as a percentage of energy. We observed little or no effect on intakes of whole dairy products, red meat, or snack foods. Patterns were similar for boys and girls.

Conclusions: Eating family dinner was associated with healthful dietary intake patterns, including more fruits and vegetables, less fried food and soda, less saturated and trans fat, lower glycemic load, more fiber and micronutrients from food, and no material differences in red meat or snack foods.

Haelle, T. (2014, October 13). Child obesity risk reduced with family meals. *MDedge*. Retrieved from <http://www.clinicalendocrinologynews.com/specialty-focus/obesity/single-article-page/child-obesity-risk-reduced-with-family-meals/c0e30bc558e1bd57ce91b08ce6caf778.html?email=AFISHEL@PARTNERS.ORG&ocid>

The study was supported by the National Institute of Diabetes, Digestive and Kidney Diseases. The researchers used multiple methods to observe the family meals of 120 low-income and/or minority children, average age 9 years, and years in the Minneapolis/St. Paul area over 8 days. Only families who typically ate at least three family dinners a week participated, and half the children were considered overweight (body mass index of 85th percentile or higher).

According to the researchers, “positive measures (e.g., group enjoyment, relationship quality, warmth/nurture) were associated with reduced prevalence of child overweight/obesity, and more negative measures (e.g., hostility, indulgent/permissive, inconsistent discipline) were associated with increased prevalence of child overweight/obesity.”

“Positive” variables included “group enjoyment, relationship quality, communication, parental influence, and positive reinforcement. “Negative” measures included hostility, lecturing/moralizing, silence, indulgence/permissiveness, inconsistent discipline, and intrusiveness/control.”

Hamilton, S. K., & Hamilton Wilson, J. (2009). Family Mealtimes: Worth the Effort?. *ICAN: Infant, Child, & Adolescent Nutrition*. Retrieved from <https://journals.sagepub.com/doi/pdf/10.1177/1941406409353188>

Investing time and energy in daily family mealtimes appears to hold merit. Empirical research suggests it could be time well spent, possibly having a positive impact on the health and psychosocial functioning of children and adolescents.

The research to date, although still correlational in nature, suggests an important trend that regular family mealtimes have a positive impact on family communication and functioning; the increased consumption of



fruits, vegetables, and grains in children and adolescents; and improved school performance and may also act as a protective factor in reducing the risk for adolescent mental health problems and addiction. Although caution is warranted in reviewing the many research studies, which are predominately cross-sectional survey designs, the evidence seems to suggest that efforts to improve the quality and increase the quantity of family mealtimes are of merit to the health and well-being of children and adolescents.

Parents are in an especially important position to help their children and teens become more aware of the importance of family meals and should be encouraged to find creative ways to make more frequent mealtimes a priority in their own homes. Family meals encourage family belonging. Research findings to date suggest that family meals have the potential to make a beginning contribution to the health and lives of children and adolescents

Harrison, M. E., Norris, M. L., Obeid, N., Fu, M., Weinstangel, H., & Sampson, M. (2015). Systematic review of the effects of family meal frequency on psychosocial outcomes in youth. *Canadian Family Physician*, 61. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4325878/>

Overall, results show that frequent family meals are inversely associated with disordered eating, alcohol and substance use, violent behaviour, and feelings of depression or thoughts of suicide in adolescents. There is a positive relationship between frequent family meals and increased self-esteem and school success. Studies show substantial differences in outcomes for male and female children and adolescents, with females having more positive results.

This systematic review provides further support that frequent family meals should be endorsed. All health care practitioners should educate families on the benefits of having regular meals together as a family.

Hersey, J. D., Jordan, A., & Center for Disease Control and Prevention. (2007). *Reducing children's TV time to reduce the risk of childhood overweight: the children's media use report* (RTI Project Number 8680.006). Atlanta, GA: Center for Disease Control and the Association for Prevention Teaching and Research. Retrieved from <https://jamanetwork.com/journals/jama/fullarticle/192031>

Some observational studies have found an association between television viewing and child and adolescent adiposity. Compared with controls, children in the intervention group had statistically significant relative decreases in body mass index, triceps skinfold thickness, waist circumference, and waist-to-hip ratio. Relative to controls, intervention group changes were accompanied by statistically significant decreases in children's reported television viewing and meals eaten in front of the television. There were no statistically significant differences between groups for changes in high-fat food intake, moderate-to-vigorous physical activity, and cardiorespiratory fitness.

Hofferth, S.L. (2001). How American children spend their time. *Journal of Marriage and the Family*, 63, 295-308.



This article examines how American children under age 13 spend their time, and then associates activities with achievement and behavior. Data was drawn from the 1997 Child Development Supplement to the Panel Study of Income Dynamics.

The results suggest that “parents' characteristics and decisions regarding marriage, family size, and employment affect the time children spend in educational, structured and family activities, which may affect their school achievement.” Family time spent at meals and time spent sleeping are linked to fewer behavior problems.

Julier, A. P. (2014). Eating Together: Food, Friendship, and Inequality.

Sociologist Alice P. Julier argues that the ways in which Americans eat together play a central role in social life in the United States. Focusing on the experiences of African American and non-ethnic white hosts and guests, she explores the concrete pleasures of cooking as well as the discourses of food and sociability that shape the experience of shared meals.

Delving into a wide range of research, Julier analyzes etiquette and entertaining books from the past century and conducts interviews and observations of dozens of dinner parties, potlucks, and buffets. She finds that when people invite friends, neighbors, or family members to share meals within their households, social inequalities involving race, economics, and gender reveal themselves in interesting ways: relationships are defined, boundaries of intimacy or distance are set, and people find themselves either excluded or included. An insightful map of the landscape of social meals, Eating Together shows how and why people will go to considerable effort, even when resources are limited, to ensure that they continue to eat together with friends throughout their lifetimes.

Kasper, N., Ball, S. C., Halverson, K., Miller, A. L., Appugliese, D., Lumeng, J. C., Peterson, K. E. (2019). Deconstructing the Family Meal: Are Characteristics of the Mealtime Environment Associated with the Healthfulness of Meals Served?. *Journal of the Academy of Nutrition and Dietetics*, 119(8), P1296-1304.

Multiple studies and guidelines emphasize the benefits associated with family meals. However, family meals are not well defined and little research has been conducted to determine whether mealtime characteristics are associated with the healthfulness of foods served. Family Meals were associated with greater healthfulness of the foods served. Characteristics of mealtime that are commonly utilized to define Family Meal were differentially associated with meal healthfulness.

Khoury, M., Manlhiot, C., Gibson, D., Stearne, N., Chahal, N., Dobbin, S., & McCrindle, B. (2015). Evaluating the associations between buying lunch at school, eating at restaurants, and eating together as a family and cardiometabolic risk in adolescents. *Canadian Journal of Cardiology*, 31(10), S266-S267.



Purchasing lunch at school, eating at restaurants, and infrequently eating dinner as a family may be associated with increased cardiometabolic risk. We sought to evaluate these associations in adolescents undergoing universal school-based screening.

Eating dinner as a family more frequently was associated with decreased cardiometabolic risk factors. There were no clinically significant associations between buying lunch at school or eating at restaurants and cardiometabolic risk. There were significant associations between infrequently eating together as a family and buying lunch at school and buying lunch at school and more frequently eating at restaurants. These associations may help identify potentially modifiable risk factors regarding adolescent eating behaviours and cardiometabolic risk.

Larson, N. I., Neumark-Sztainer, D., Hannan, P. J., & Story, M. (2007). Family meals during adolescence are associated with higher diet quality and healthful meal patterns during young adulthood. *Journal of the American Dietetic Association*, 107(8), 1502-1510.

Researchers from the University of Minnesota's School of Public Health surveyed 946 female students and 764 male students in high school classrooms from 1998-1999; mean age 15.9 years, and by mail between 2003-2004; mean age 20.4 years.

The study found that "family meal frequency during adolescence predicted higher intakes of fruit, vegetables, dark-green and orange vegetables, and key nutrients and lower intakes of soft drinks during young adulthood. Frequency of family meals also predicted more breakfast meals in females and for both sexes predicted more frequent dinner meals, higher priority for meal structure, and higher priority for social eating."

The study concludes that family meals during adolescence may have a lasting and positive influence on quality of diet and healthy meal patterns in adulthood.

Litterbach, E. V., Campbell, K. J., & Spence, A. C. (2017). Family meals with young children: an online study of family mealtime characteristics, among Australian families with children aged six months to six years. *BioMed Central Public Health*, 17:111. Retrieved from <https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-016-3960-6>

The Family Meals with Young Kids study was an online survey completed by parents in 2014. Participants (n=992) were mostly mothers (97%) with a university degree (71%). The evening meal was the most frequently reported meal eaten together with the responding parent and child. Snacks were least commonly eaten together. The frequency of having everyone present for the evening meal was inversely associated with socioeconomic position. Parent rated importance of family meals was generally high and positively associated with higher socioeconomic position. Most children consumed breakfast, lunch, and dinner sitting at a table or bench and this was positively associated with higher socioeconomic position for all meal types. Increased television viewing during meals was inversely associated with socioeconomic position.



Australian families engage in many healthy mealtime behaviours. Evidence that parents share meals with children and place high value on mealtimes with children provides important opportunities for promoting healthy behaviours in families. The choice of eating location and the practice of viewing TV during mealtimes are examples of two such opportunities. Socioeconomic patterning of the location of mealtimes and TV viewing during meals may contribute to socioeconomic differences in dietary intakes and may be important targets for future health promotion.

Markson, S., & Fiese, B. (2000). Family rituals as a protective factor for children with asthma. *Journal of Pediatric Psychology*, 25(7), 471-479. Retrieved from <https://academic.oup.com/jpepsy/article/25/7/471/952605>

Two groups of families with children between 6 and 12 years of age were recruited: one group consisted of 43 families with a child with asthma and the other group consisted of 43 families with a healthy peer. Children were given a 37-item self-report questionnaire designed to measure anxiety in children ages 6 to 17 years. Parents were given two questionnaires: one to assess family rituals and one to assess stresses within the child, parent, and life stress.

An inverse relationship between meaningful family rituals and child anxiety was found. Children raised in households marked by deliberate and meaningful family rituals report fewer symptoms of anxiety, including worry and physical symptomatology. Families who are able to create meaningful family rituals maybe be better equipped to respond to multiple stressors. Families that reported more meaning in their family routines had children who reported lower levels of anxiety. Mother endorsement of family ritual meaning and father endorsement of family ritual routine were most strongly related to lower levels of anxiety. Support for the protective function of meaningful family rituals was stronger when a general health stress model was used rather than the presence or absence of asthma alone.

Family rituals may serve a protective function for children with asthma under conditions of heightened parenting stress.

McCray, V., Harris, V. W., & Gillen, M. (2019). Benefits of Family Meals. *University of Florida: IFAS Extension*, 2013(5). Retrieved from <https://journals.flvc.org/edis/article/view/121004/119605>

Eating family meals together typically results in positive benefits for family members. Benefits can include increases in educational, health, social, and behavioral skills. In addition, participating in family meals can increase positive family interactions and overall family well-being. Accessing programs designed to focus on mealtime and family and youth development can be critical to introducing families to the benefits of family meals.

Meier, K., & Musick, A. (2012). Assessing causality and persistence in associations between family dinners and adolescent well-being. *Journal of Marriage and Family*, 74(3), 476-493. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3686529/>

This article takes a close and somewhat skeptical look at the studies that have linked adolescent well-being and family dinner frequency. The study attempts to determine whether those associations are causal, and if they



persist over time. The study utilizes nationally representative panel data on adolescents, following their rates mental health, substance abuse and delinquency.

The article references the notion “that it is naïve to expect to alter family practices ‘by isolating one particular element of family life without acknowledging how families operate as social systems.’”

The authors’ findings lend “some support” to a causal interpretation of the link between family meals and at least some aspects of child well-being. But: “we continue to have very little understanding of the mechanisms behind this relationship.”

Montefiore Medical Center. (2014). Children who regularly practice family routines exhibit higher social-emotional health. Retrieved from <http://www.sciencedaily.com/releases/2014/03/140304125423.htm>

Researchers examined data from a large, nationally representative sample of preschool-aged children -- the Early Childhood Longitudinal Study- Birth Cohort, conducted by the National Center for Education Statistics. Researchers examined the parental responses of 8550 children.

This study, written by researchers at The Children’s Evaluation and Rehabilitation Center at Albert Einstein College of Medicine of Yeshiva University, concluded that “children who regularly sing, play, story-tell and eat dinner with their families tend to have higher social-emotional health.” Results showed that “children who participate in five family routines are more than twice as likely to have high social-emotional health, and for each additional routine that a parent and child do together, there is an almost 50 percent greater likelihood of having high social-emotional health.”

Muñiz, E. I., Silver, E. J., & Stein, R. E. K. (2014). Family routines and social-emotional school readiness among preschool-age children. *Journal of Developmental & Behavioral Pediatrics*, 35(2), 93-99.

Abstract only: <https://www.ncbi.nlm.nih.gov/pubmed/24509054>

Looked at data from Early Childhood Longitudinal Study-Birth Cohort preschool wave. Looked at SEH in association with various family routines (family dinner 5+days/week, reading/storytelling/singing 3+ /week, and play more than a few times/week). Out of roughly 8550 children, about 16.6% had high SEH, with 1.47 greater odds for each additional routine that a child participated in. In adjusted models, there were the following greater odds for SEH: dinner 1.4, storytelling 1.9, singing 1.5, and play 1.3 (reading not associated with greater odds of high SEH).

Participation in a higher number of routines and in select routines was associated with increased likelihood of having high SEH. Promoting family routines may contribute to greater SEH before school entry.



Musick, K., & Meier, A. (2012). Assessing causality and persistence in associations between family dinners and adolescent well-being. *Journal of Marriage and Family*, 74(3), 476-493.

Adolescents who share meals with their parents score better on a range of well-being indicators. Using 3 waves of the National Longitudinal Survey of Adolescent Health (N = 17,977), the authors assessed the causal nature of these associations and the extent to which they persist into adulthood. They examined links between family dinners and adolescent mental health, substance use, and delinquency at Wave 1, accounting for detailed measures of the family environment to test whether family meals simply proxy for other family processes. As a more stringent test of causality, they estimated fixed-effects models from Waves 1 and 2, and they used Wave 3 to explore persistence in the influence of family dinners. Associations between family dinners and adolescent well-being remained significant, net of controls, and some held up to stricter tests of causality. Beyond indirect benefits via earlier well-being, however, family dinners associations did not persist into adulthood.

The National Center on Addiction and Substance Abuse at Columbia University. (2012). The importance of family dinners (Report No. VIII). New York, NY: Columbia University. Retrieved from http://www.casacolumbia.org/templates/Publications_Reports.aspx#r118

Full article: <https://www.centeronaddiction.org/addiction-research/reports/importance-of-family-dinners-2012>

Using an outside firm, conducted telephone surveys with 1,003 teens (nationally, USA). Found that teens who have frequent family dinners (5-7x/week) reported having high quality relationships with parents (teens who report less than excellent relationships with their parents have been found to be more likely to engage with marijuana, alcohol, and tobacco).

Neumark-Sztainer, D., Wall, M., Fulkerson, J. A., & Larson, N. (2013). Changes in the frequency of family meals from 1999-2010 in the homes of adolescents: Trends by sociodemographic characteristics. *Journal of Adolescent Health*, 52(2), 201-206. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3552297/>

A repeated cross-sectional design was used. Participants were from Minneapolis/St. Paul middle schools and high schools and included 3,072 adolescents in 1999 and 2,793 adolescents in 2010 from diverse ethnic/racial and socioeconomic backgrounds. Trends in family meal frequency were examined using inverse probability weighting to control for changes in sociodemographic characteristics over time.

Family meal frequency remained fairly constant from 1999 to 2010 in the overall sample, but decreases were found in population subgroups including girls, middle school students (grade 6-8), Asians, and youth from low socioeconomic backgrounds. Furthermore, the percentage of youth from low socioeconomic backgrounds eating five or more meals in the past week decreased. In contrast, family meal frequency tended to increase over time among youth from higher socioeconomic backgrounds.

The widening gap in family meal frequency between youth from low and high socioeconomic backgrounds is concerning, particularly given the greater risk for poor health outcomes among low-income youth. Given findings from other studies suggesting multiple benefits of family meals, interventions to increase family meal



frequency are needed that target adolescents and their families from the most vulnerable segments of the population.

Neumark-Sztainer, D., Eisenberg, M. E., Fulkerson, J. A., Story, M., & Larson, N. (2008). Family meals and disordered eating in adolescents: Longitudinal findings from Project EAT. *Archives of Pediatric and Adolescent Medicine*, 162(1), 17-22.

Researchers from the University of Minnesota surveyed 2500 students from 31 Minnesota schools (who completed in-class assessments in 1999) and who then later completed mailed surveys, in 2004.

Among adolescent girls, found that regular family meals (at least 5x/week) were associated with lower prevalence of extreme weight control behaviors 5 years later (adjusting for sociodemographic characteristics, body mass index, family connectedness, parental encouragement to diet, and extreme weight control behaviors at time of initial survey). From the study: "the high prevalence of disordered eating behaviors among adolescent girls and the protective role of family meals suggest a need for interventions aimed at promoting family meals." No association/prediction for adolescent boys.

Neumark-Sztainer, D., Wall, M., Story, M., & Fulkerson, J. A. (2004). Are family meal patterns associated with disordered eating behaviors among adolescents?. *Journal of Adolescent Health*, 35(5), 350-359.

Researchers from the University of Minnesota School of Public Health collected data from 4746 ethnically diverse adolescents from public middle and senior high schools who participated in the Project EAT study (Eating Among Teens). The study attempted to examine associations between family meal patterns and disordered eating in adolescent girls and boys.

According to the study, "adolescents who reported more frequent family meals, high priority for family meals, a positive atmosphere at family meals, and a more structured family meal environment were less likely to engage in disordered eating." The study concludes that family meals may have the potential to play an important role in the prevention of unhealthy weight control behaviors among youth.

Sen, B. (2010). The relationship between frequency of family dinner and adolescent problem behaviors after adjusting for other family characteristics. *Journal of Adolescence*, 33(1), 187-196.

This study states that "programs that promote family meals are beneficial." Published by the Department of Health Care Organization & Policy at the University of Alabama, this study used data from the National Longitudinal Survey of Youth, published in 1997.

The study found that frequency of family meals negatively associated with substance-use and running away for females; drinking, physical violence, property-destruction, stealing and running away for males. Although



correlational, these results suggest that family dinners are helpful to adolescent mental health and may help protect adolescents from the harmful consequences of cyberbullying.

Share Our Strength's Cooking Matters. (2012). It's dinnertime: A report on low-income families' efforts to plan, shop for and cook healthy meals. Retrieved from <http://www.nokidhungry.org/cm/study/>

This report, published by the No Kid Hungry / Share Our Strength nonprofit, includes data from a survey conducted by a third party researcher on 1500 low to middle income families. The report was sponsored by ConAgra Foods and Walmart.

This highly readable report attempts to break down stereotypes about low-income families' eating habits. The study showed that on average, low-income families cook dinner 4 times a week - and 61% of families are making dinner from scratch most days of the week. The report states that families view cost as the primary barrier to healthy eating, and contains information about the work, associated with the No Kid Hungry Campaign, that strives to educate low income families about how to stretch their food dollars on affordable nutritious foods, and how to prepare easy and healthy meals at home. Cooking Matters hosts six-week programs in 41 states.

Snow, C. E., & Beals, D. E. (2006). Mealtime talk that supports literacy development. *New Directions in Child and Adolescent Development*, 2006(111), 51-66.

This article, authored by two professors of education, compiles data to show the literacy development outcomes that can be achieved through conversations at the dinner table. The article compiles current research, with particular attention paid to the Home-School Study of Language and Literacy Development, a major longitudinal study that worked to link preschoolers' oral language development with their literacy skills in high school.

The authors conclude that findings of the Home-School study “demonstrate that the kind of talk that normally occurs at mealtimes provides rich information to children about the meanings of words, and thus constitutes a context for learning vocabulary embedded in all the other kinds of learning that are going on: learning to participate as a family member, learning to be a member of the larger culture, learning to give explanations and tell stories, learning to take turns, and learning to enjoy family interactions.”

The article concludes that “participation in dinner table conversations offers children opportunities to acquire vocabulary, practice producing and understanding stories and explanations, acquire general knowledge, and learn how to talk in culturally appropriate ways.”



Videon, T. M., & Manning, C. K. (2003). Influences on adolescent eating patterns: The importance of family meals. *Journal of Adolescent Health, 32*(5), 365-373.

Researchers from the Institute for Health, Health Care Policy and Aging Research, at Rutgers completed their study by analyzing data from 18,177 adolescents in the first interview of the National Longitudinal Study of Adolescent Health.

According to the study, “almost one in five adolescents reported skipping breakfast the previous day. A large percentage of adolescents reported eating less than the recommended amount of vegetables (71%), fruits (55%), and dairy foods (47%). Adolescents with better-educated parents had better consumption patterns than those with less-educated parents.”

Consumption patterns differed significantly by race. Adolescents who perceived themselves to be overweight were significantly more likely to have poor consumption patterns. The presence of a parent at the evening meal was associated with a lower risk of poor consumption of fruits, vegetables, and dairy foods as well as the likelihood of skipping breakfast.

Walton, K., Horton, N. J., Rifas-Shiman, S. L., Field, A. E., Austin, S. B., Haycraft, E., Breen, A., & Haines, J. (2018). Exploring the Role of Family Functioning in the Association Between Frequency of Family Dinners and Dietary Intake Among Adolescents and Young Adults. *JAMA Network Open, 1*(7):e185217. Retrieved from <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2715616>

Data from the 2011 questionnaire in the Growing Up Today Study were used for this cross-sectional study. Linear regression models examined the extent to which family dinner frequency was associated with self-reported intake of fruits and vegetables, sugar-sweetened beverages, fast food, and takeout food among 2728 adolescents and young adults (ages 14-24 years old).

Among the 2728 participants, there were 1559 female and 1169 male participants. Most participants identified as white. More frequent family dinners were associated with higher-quality dietary intake regardless of level of family functioning; interactions between family functioning and family dinner frequency were not significant. More frequent family dinners were associated with lower intake of sugar-sweetened beverages for male participants only. More frequent family dinners are associated with healthful dietary intakes among youths, regardless of level of family functioning. Family dinners may be an appropriate intervention target for improving dietary intake among youths.

Weinstein, M. (2005). *The Surprising Power of Family Meals: How Eating Together Makes Us Smarter, Stronger, Healthier and Happier*. Hanover, NH: Steerforth Press.



The Surprising Power of Family Meals is the first book to take a complete look at a ritual that was virtually universal a generation ago but has undergone a striking transformation. No longer honored by society as a time of day that must be set aside, some families see family supper as little more than a quaint relic. But others are beginning to recognize it as a lifeline – a way to connect with their loved ones on a regular basis and to get more enjoyment out of family life. The Surprising Power of Family Meals presents stories, studies, and arguments from the fields of psychology, education, nutrition, family therapy, anthropology, sociology, linguistics, and religion. It provides examples of families and communities around North America responding creatively to the pressures of a 24/7 world to share strategies for taking what is best from our past and transforming it to meet current needs.

Wolfson, J. A., & Bleich, S. N. (2015). Is cooking at home associated with better diet quality of weight loss intention?. *Public Health Nutrition*, 18(8) 1397-1406. Retrieved from https://www.cambridge.org/core/services/aop-cambridge-core/content/view/B2C8C168FFA377DD2880A217DB6AF26F/S1368980014001943a.pdf/is_cooking_at_home_associated_with_better_diet_quality_or_weightloss_intention.pdf

Overall, compared with low cookers (0-1 times/week), a high frequency of cooking dinner (6-7 times/week) was associated with lower consumption of daily kilojoules (9054 v. 9627 kJ, $P=0.002$), fat (81 v. 86 g, $P=0.016$) and sugar (119 v. 135 g, $P<0.001$). Individuals trying to lose weight consumed fewer kilojoules than those not trying to lose weight, regardless of household cooking frequency (2111 v. 2281 kJ/d, $P<0.006$).

Conclusions: Cooking dinner frequently at home is associated with consumption of a healthier diet whether or not one is trying to lose weight. Strategies are needed to encourage more cooking among the general population and help infrequent cookers better navigate the food environment outside the home.

Woolley, K., & Fishbach, A. (2016). A recipe for friendship: Similar food consumption promotes trust and cooperation. *Journal of Consumer Psychology*, 27(1), 1-10.

This research examines the consequences of incidental food consumption for trust and cooperation. We find that strangers who are assigned to eat similar (vs. dissimilar) foods are more trusting of each other in a trust game (Study 1). Food consumption further influences conflict resolution, with strangers who are assigned to eat similar foods cooperating more in a labor negotiation, and therefore earning more money (Study 2).

The role of incidental food similarity on increased trust extends to the product domain. Consumers are more trusting of information about non-food products (e.g., a software product) when the advertiser in the product testimonial eats similar food to them (Study 3). Lastly, we find evidence that food serves as a particularly strong cue of trust compared with other incidental similarity. People perceive that pairs eating similar foods, but not pairs wearing similar colored shirts, are more trusting of one another (Study 4).