

# Families, Food and Work: Taking a Long View

**An Economic and Social Research Council and Food Standards Agency  
funded study**

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With thanks to the children and young people who took part in the study for permission to use their drawings and photographs

## Background

The study was funded as a collaborative grant between the Economic and Social Research Council (ESRC) and Food Standards Agency (FSA) 2009 - 2014. On 1 October 2010, responsibility for nutrition policy transferred from FSA to the Department of Health (DH). As a result, the research project also transferred to DH. In April 2013 responsibility for nutrition policy subsequently transferred to Public Health England. The key aim of the ESRC/FSA call, 'Exploring and explaining UK dietary decisions in the 21st century', was to fund research to 'build on what is already known' about diet in the UK. Specifically, the programme sought to generate innovative research 'to further explore and explain UK dietary decisions', the contexts in which they are made, and the circumstances under which 'dietary decisions' change - or do not change - over time. The brief offered social scientists a first opportunity to use the new rolling National Diet and Nutrition Survey (NDNS), and to build in a longitudinal element. The study made use of the NDNS as a dataset for secondary analysis and as a sampling frame for a qualitative study of 47 households with children aged 2-10 years. These households were followed up 2 years later.

## Policy context

The UK's national food guide, the 'Eatwell plate', sets out government advice on a healthy balanced diet. It recommends eating plenty of fruit and vegetables and starchy foods, some milk and dairy foods, some meat, fish, eggs, beans and other non-dairy sources of protein. Foods and drinks which are high in fat and/or sugar should only be consumed in small amounts. Whilst evidence from government dietary surveys shows that the diets of the UK population do not meet recommendations, less is known about why this is the case.

## Study focus

The study focused on employed families with young children. How far parents are able to follow dietary guidelines has importance for their children's nutrition and health. Further, the fact that the combined working hours of British mothers and fathers are among the highest in Europe may have implications for children's diets. Previous research using the Millennium Cohort Study<sup>1</sup> (MCS) found a link between mothers' hours of paid employment and childhood overweight and eating behaviours. However, since the MCS includes limited information about diet, this study set out to examine this finding using the NDNS. In addition, through a smaller in-depth study of households with children drawn from the NDNS it sought to examine how food and eating were managed by busy working parents. Families were purposively sampled to include different levels of household income and children with higher and lower dietary 'scores' based on a diet index designed for the study using NDNS data.

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<sup>1</sup> Hawkins, S.S., Cole, T.J. and Law, C. (2008). Maternal employment and early childhood overweight: findings from the UK Millennium Cohort Study. *International Journal of Obesity*, 32 (1), 30–38.

Hawkins, S.S., Cole, T. and Law, C. (2009). Examining the relationship between maternal employment and health behaviours in 5-year-old British children. *Journal of Epidemiology and Community Health*, 63 (12), 999-1004.

## Key findings

The **secondary analysis of NDNS** found that:

- Maternal employment is not associated with the healthiness of children's diets
- Confirming other UK research<sup>2</sup>, children have healthier diets overall when they eat with family members in the evening, even when controlling for income and social class
- Contrary to some US research<sup>3</sup>, there is no association between maternal employment and frequency of eating evening meals with family members

The **qualitative research study** of 47 in-depth cases at Wave 1 and 36 at Wave 2 added to the body of evidence by confirming previous research. Important conclusions were that:

- Family food practices such as eating together depend upon the extent to which the time schedules of all household members (including children) do or do not synchronise
- The preferences of children as well as parents influence what they and their families eat
- The children of working parents eat in a range of care and education settings. Transitions and changes in children's and parents' lives, such as starting secondary school or working longer hours, may affect children's diets, in some cases negatively, in others positively
- Parents and children were aware of healthy eating advice and were trying hard to follow a healthy diet in most cases. Constraints on their ability to do so included children's preferences for unhealthier foods, the perceived higher costs and time demands of providing healthier meals, and the expectation that mothers take responsibility for children's diets when they are in paid employment

**Approaches that helped** families manage busy lives with a diet more closely in line with recommendations included:

- The synchronisation of parents' and children's schedules that enabled families to eat together
- Men sharing responsibility for planning and preparing healthy meals
- Buying, saving or 'shifting' time, for example by employing paid help, using slow cookers or bulk cooking and freezing meals in advance, and using 'quick and easy' processed or pre-prepared foods
- Healthy foods in schools and childcare that can expand children's food preferences, introduce healthier foods and substitute for a less healthy diet at home

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<sup>2</sup> Skafida, V. (2013). The family meal panacea: exploring how different aspects of family meal occurrence, meal habits and meal enjoyment relate to young children's diets. *Sociology of Health & Illness* 35(6), 902-923.

<sup>3</sup> E.g. Neumark-Sztainer D, Hannan PJ, Story M, Croll J, and Perry C. (2003). Family meal patterns: associations with sociodemographic characteristics and improved dietary intake among adolescents. *Journal of the American Dietetic Association*. 103(3), 317-22.

### **Methodological advances include**

- Using the NDNS for both secondary analysis and a linked qualitative longitudinal study and integrating the different data where appropriate
- Making recommendations to collect additional socio-demographic data (maternal education and hours of work); these will be included in future years of the NDNS
- Defining a healthy diet for the purposes of drawing the sample and as an outcome variable for the quantitative research
- Defining 'family meals' for both the qualitative and quantitative parts of the research

### **Discussion**

The point of using different methods to address diet and health is to frame questions in different ways and examine different dimensions of the same phenomena. Given that secondary analysis of NDNS showed that maternal employment did not appear to be associated with children's unhealthier diets, the qualitative study sought to examine how food and eating were organised and given meaning at the household level. Since mothers' hours of work were not included in the NDNS survey, it was not possible to establish whether longer hours of maternal employment were associated with children's healthier or unhealthier diets, or frequency of eating family meals, using the NDNS data. The qualitative study provided the opportunity to collect information about mothers' and fathers' hours and patterns of employment and to examine how food and eating fitted within families' ways of managing paid work and care. It explored reports of routines of procuring, preparing and eating food in families, the relative control of children and parents over children's food, parents' and children's accounts of children's food and eating elsewhere, the resources and rationales the parents drew upon for eating in the ways they did, and how children's eating and diet changed over time and in what circumstances.

Two examples suggest how the qualitative data have added to what is known. In the case of family meals issues of timing rather than time for working families are important: how schedules of mothers, fathers and children can facilitate or constrain eating together and also to some extent what kinds of food were consumed, for example whether children and parents ate the same meal. The examination of change over time revealed the circumstances under which some children's diets improved (for example, at the start of primary school), or worsened (for example when they moved to secondary school). Moments of change in parents' lives also affected children's diets in some cases. In others, however, established family food practices, for example eating a vegetarian diet, weathered the changes happening to children elsewhere in their lives.

### **Conclusion**

Healthy eating policies could usefully take into account (a) changing patterns of family life in a '24/7 society', together with (b) rising food prices and static incomes. The children of working parents eat in a range of settings and children influence their own and the family's food practices. Moreover children's diet preferences and intake may change over time in response to developmental change and life course transitions in their own lives. Further, whilst health messages are targeted at 'parents', it is mothers who continue to be largely responsible for feeding families even when they are also in paid employment. To take account of these findings we suggest that:

- Sustained attention and additional resources are devoted to the **provision of healthy foods in school and childcare settings**, including: continuation of the School Fruit and Vegetable Scheme; extending universal free school meals to older children; regulating the nutritional quality of food in all schools and childcare settings.
- Dietary guidance messages such as those of the social marketing campaign Change4Life are tailored to the needs of busy working parents and in particular targeted towards **encouraging more fathers to prepare healthy balanced meals** for families.
- Efforts to work with food manufacturers and retailers to **make pre-prepared, processed and convenience foods healthier** are intensified.
- The **regulation of junk food marketing to children** is extended to include all forms of media and that a body responsible for developing, monitoring and implementing regulations which is independent of the advertising industry is established
- Sufficient recognition is given to **different types of research evidence** which may each provide different insights or raise new questions regarding family food practices

Outputs from the study are listed in Appendix 1. Other impacts of the study to date include a number of methodological developments including:

- Demonstrating the value of the NDNS for answering policy relevant research questions and a means of purposive sampling on the basis of known diets
- Refinements to the NDNS to help researchers explore such issues further, including the addition of new variables from 2015 on maternal education and hours of employment
- Development of a methodology for assessing 'healthy' diets for children in different age groups using the NDNS data

Given that the qualitative sample was skewed towards the higher end of the household income range, further research is needed on food practices in low-income employed families.

## Research design and methods

The research design was a longitudinal, mixed methods approach using the NDNS for secondary analysis and as a sampling frame for the qualitative study. Forty-seven households including working parents and their children (aged 2-10 years) were recruited at Wave 1. Thirty-six of these were successfully followed up at Wave 2, with a two-year gap between visits. Semi-structured interviews were conducted with parents (usually mothers). With children a combination of interviews and other activities (including drawing and photography) were undertaken. The sample included dual parent and lone parent families. Households were purposively sampled to include children with healthier and less healthy diets and a spread of higher and lower income families. Given the parents were mostly couples in paid employment the sample was skewed towards the higher end of the income distribution. In 19/31 couple households at Wave 1, and 17/30 at Wave 2, the pattern of working hours was that of the 'traditional 1.5 earner model' in which the father was employed full time and the mother part time. In 10/31 cases at Wave 1 and 11/30 at Wave 2, the pattern was that of the 'dual full-time earner'. Secondary analyses of the NDNS and other datasets (the Health Survey for England, the Avon Longitudinal Study of Parents and Children, Understanding Society and the Millennium Cohort Study) were also undertaken.

## Further information

A list of study outputs to date and a bibliography are provided in appendices 1 and 2. These, and further information, may be found on the study website: [www.foodfamiliesandwork.co.uk](http://www.foodfamiliesandwork.co.uk)



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