Abstract: Family stress theory provides a structure to obtain and analyze maternal perceptions of toddler feeding challenges within low-income African-American households. Focus groups, with a total of 20 mothers, were conducted in four counties in a Midwestern state in the United States. The following themes emerged from the data analysis: identification and appraisal of feeding challenges, child temperament, maternal psychological and physical states, and coping behaviors. Study conclusions provide suggestions related to child feeding that Extension educators should consider when offering culturally appropriate mealtime management interventions for African-American parents of young children.

Introduction

High levels of parenting stress have been associated with dysfunctional parenting behaviors, such as unresponsiveness to infant cues and suboptimal maternal-child interactions (Crnic & Low, 2002). Mealtimes can be especially stressful for parents of young children. The purpose of the study reported here was to provide insight into how food choices and mealtime behaviors are affected by stressors within African-American households. The study was part of a larger study aimed at developing a culturally sensitive nutrition curriculum for parents of toddlers.

Literature Review

Family stress theory (Boss, 2002) served as the theoretical framework for the study. According to this theory, interactions among 1) stressor events, including parenting challenges, 2) coping resources, and 3) the family’s perception of the events are embedded in the external and internal context of the family (Bomer, 2004). The internal and external contexts determine how resources are used to cope with daily stressors. This framework
allowed us to examine low-income African-American mothers' perceptions of dealing with parenting stressors (feeding challenges.)

Maternal and child characteristics are part of the internal context of the family. Studies have shown that negative affective states in the mother are associated with higher stress levels and ineffective coping (Deater-Deckard, 2004). Additionally, child factors such as temperament have been found to play a role in parenting stress. Many studies have also found that mothers who label their children as having a difficult temperament experience more parenting stress (Coplan, Bowker, & Cooper, 2003).

Culture is part of the external context of the family. Research has shown that culturally based coping behaviors common to African-American households include the use of strong social support networks, flexible family roles, and an indulgent parenting style (Friedman, 2003; Hurley, Black, Papas, & Caufield, 2008). Sharing of caretaking and domestic tasks is a resourceful way to reduce parenting stress and is more common within African American families than in Caucasian families (Friedman, 2003).

**Conceptual Model**

Our conceptual model was an integration of family stress theory into a feeding framework (Bentley, Gavin, Black, & Teti, 1999). Within this model the elements of cultural context, parent characteristics, and child characteristics give definition to parenting stressors (feeding challenges), appraisal of stressors, and coping behaviors. This leads to feeding practices and ultimately affects the child's health and development (Figure 1).

![Conceptual Model for Infant Feeding Practice](image)

**Methodology**

Focus groups in four Michigan counties were used to investigate maternal perceptions of feeding challenges during mealtimes with their toddlers. Four focus groups were conducted, reaching a total of 20 low-income African-American mothers of toddlers between 15 and 36 months of age.
Focus Group Procedures

The study sample consisted of low-income African-American mothers of toddlers recruited through Michigan State University Extension’s Building Strong Families (BSF) and Expanded Food and Nutrition Education Programs (EFNEP) and Michigan’s Early Head Start (EHS). One-hour focus groups were carried out with groups of two to seven mothers (n = 2 for site one, n = 7 for site two, n = 4 for site three, and n = 7 for site four). Each of the mothers completed a self-administered demographic questionnaire and the Center for Epidemiologic Studies-Depressive Scales (CES-D) prior to the focus group discussions. After completing the assessments, an African-American moderator asked questions to elicit maternal perceptions regarding toddler feeding and mealtime behaviors, feeding challenges, and coping strategies.

Analytic Approach

The focus group interviews were transcribed verbatim by a professional. Data were analyzed as a five-stage iterative process: development of a coding schedule; coding of the data; description of the main themes; linking of the themes; and development of explanations for the relationships between themes. Analysis was done manually, and the Nonnumerical Unstructured Data Indexing Searching and Theorizing (NUD*IST QRS5), a qualitative software program that facilitates the coding, searching, and retrieval of data to organize and manage the qualitative data (NUD*IST, 2000), was used. The self-report data were analyzed using SPSS version 15.0 and included frequency distributions, measures of central tendency, and variability.

Results

Participant Characteristics

The majority of participants had at least a high school diploma (85%), were single (70%), and were not working outside the home (60%). Participants had a mean age of 29 years (range=18-45 yrs), and 25% were first-time mothers. Sixty-five percent demonstrated on the CES-D that they were either currently experiencing depressive symptomatology or "at risk" for it; 21% scored in the clinically depressed range. The mean number of children in households was 2.4 (range 1 to 5). Children ranged in age from 15 to 36 months, eight of the toddlers were male (44%), and 10 were female (56%).

Focus Group Findings

Four major themes emerged as findings from the focus groups: 1) maternal perceptions of child temperament, 2) feeding challenges, 3) maternal psychological, and physical states and 4) coping behaviors.

Theme 1: Maternal Perceptions of Child Temperament

Many participants related mealtime stress to issues associated with child temperament. Fourteen out of 20 participants (70%) described their child as having negative child characteristics when it comes to eating. They described their children in such terms as "greedy," "selfish," "picky," "whiny," and "stubborn."

Theme 2: Identification and Appraisal of Feeding Challenges

A second theme from the focus groups was the identification and appraisal of feeding challenges that lead to parenting stress. Feeding challenges identified by participants revolved around three foci: thrown food and the resulting mess, fighting with children during mealtimes, and the cost of healthy food. Participants in all
the focus groups mentioned the issue of children throwing food and making a mess during mealtimes. Listed below is a comment from one mother.

They sit across the table from each other and they'll constantly back and forth throw food and by the time it's done, it's food on the floor or, you know, juice on the wall and something like that, you know. I don't like that.

Another feeding challenge was fighting with children during mealtimes. "Fighting" was the way participants described such issues as food refusal, "playing" at the table and mealtimes conflicts among siblings. One mother commented as follows.

He'll eat some of it and then like, he'll throw some and, you know, they'll play and then he'll take some of his juice and he spits it at his brother. It's like back and forth like I guess that's what boys do or whatever but we all, we fight all the time.

The final major feeding challenge identified by participants was the cost of providing healthy food for their children. Participants indicated that it is hard to serve healthy food to their children, even though they would like to, because it is too expensive.

You know sometimes you hear "feed your child healthy foods," but when you go to the store, for me personally, the healthy foods are the most costly and it's hard to, you know, to do that on a budget cause you go there and I can feed my child crap and get enough food but if I want to get the fresh vegetables and stuff like that, how can I balance crap, excuse me, with (healthy food).

**Theme 3: Maternal Psychological and Physical States**

A third consistent thread from the focus groups was that maternal psychological and physical states played a factor in perceived parenting stress during mealtimes. Mealtimes were described as "hard," "frustrating," and "tiring." Mothers said they are physically tired because of the many caretaking demands upon their time. They also said that feeding challenges are psychologically draining.

**Theme 4: Coping Behaviors**

A final theme from the focus groups was the description of common coping behaviors among study participants. Consistent functional behaviors for coping with feeding challenges included use of social support networks and flexible family roles. Sixty-five percent indicated that people other than themselves feed their children. Care came from both relative care and formal sources of support, such as day care, after-school care, and Head Start.

Flexibility of family roles also helped mothers cope with feeding challenges. Forty percent indicated that another household member assisted with child feeding tasks. Most often the assistance came from a spouse or older sibling.

Another predominant coping behavior was allowing the children to eat whatever and wherever they wanted (indulgent feeding). Mothers suggested that it is easiest to just "give in" to their children and let them eat whatever they want. Sixty percent of the mothers said that they often gave their children convenience foods, such as hot dogs, chips, and food from fast food restaurants. One mother expressed it as follows: "Basically we take the easy road. What they'll take (eat), we'll give them."
Also typical of the indulgent style of feeding is allowing children to eat wherever they want. Mothers in the study allowed their children to eat while walking around, lying on the couch or bed, on the floor of the living room, and while watching television. Forty percent indicated that they regularly eat meals in a room other than the dining room or kitchen. Fifty-five percent reported that the television is on during mealtimes: "A lot of time, we will get those trays, get that food, we will go in front of the television, everybody will tell what happened that day and we're eating in front of the television. (That's) reality."

**Conclusion**

The study results reported here are consistent with family stress theory in that parenting stress appeared to be strongly influenced by the internal and external context of the family's environment (Bomar, 2004). Key elements of the internal context of mothers in the study were the maternal psychological characteristics and child's temperament. Data showed that a majority of the mothers were experiencing negative affect, such as anxiety and depression, on an ongoing basis. A chronic negative emotional state can be draining to a mother who is faced with the challenges of caring for a child who is in the stage of seeking independence and autonomy (Deater-Deckard, 2004). This is particularly true if the parent doesn't have realistic expectations about child development and identifies normal developmental tasks of the toddler as oppositional behaviors or a "difficult" child temperament (Coplan et al., 2003). Mothers did not appear to realize that characteristics such as selective eating, decision-making, and independence seeking were developmentally appropriate for children 15 to 36 months.

Culture is part of the external context of the family. Culturally based coping behaviors were used to manage the daily challenges of child feeding. For example, a majority (65%) indicated that people other than themselves assist with feeding their toddler. This reliance on external social support is an important culturally based coping behavior that helps reduce the burden of parenting (Armstrong, Birnie-Lefcovitch, & Ungar, 2005).

Another coping strategy described in our study was the use of an indulgent feeding style. It is not surprising that parents who are feeling depressed or overwhelmed allow their children to determine what, where, and how much food to consume. However, this style of feeding may create additional problems for the parent and child because it doesn't allow the needs of individual family members to be met (Horodynski, Brophy-Herb, Henry, Smith, & Weatherspoon, 2009).

In summary, the study identified several themes related to child-feeding that Cooperative Extension educators should consider when offering culturally specific mealtime management interventions for African-American parents of young children. The study has shown us that interventions should provide additional knowledge related to age-appropriate expectations, the effect of parenting styles on children's food consumption, managing depression, and coping with external stressors, e.g., limited time and resources. This may include education on budgeting and time management, as well as referrals to outside agencies for financial and psychological support. Educators also need to be aware that within African-American households many different people from the parent's social network may be participating in child feeding; therefore, interventions should be targeted at external caregivers, as well as parents.

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References


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