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To cite this article: Mary P. Martinasek, Rita D. DeBate, Ashley G. Walvoord, Stephanie T. Melton, David Himmelgreen, Tammy D. Allen & Robert J. McDermott (2010) Using Social Marketing to Understand the Family Dinner with Working Mothers, Ecology of Food and Nutrition, 49:6, 431-451, DOI: 10.1080/03670244.2010.524103

To link to this article: https://doi.org/10.1080/03670244.2010.524103

Published online: 06 Nov 2010.

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Using Social Marketing to Understand the Family Dinner with Working Mothers

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The family dinner is a valued tradition that affords opportunities for social interaction and attachment, as well as sharing events of the day, role modeling, connectedness, and problem solving. Guided by the social-marketing framework, this study explored factors associated with the frequency of the family dinner among working mothers with children ages 8–11 years. A qualitative design was used, employing focus groups and Atlas-ti software for thematic analysis. Lack of time, cost, and exhaustion/lack of energy emerged as barriers. Working mothers indicated that a youth-based organization operating as a community partner could increase the frequency of the family dinner by helping with homework completion during after-school care, thereby providing mothers with the time necessary to prepare dinner. This research identified both community partners and working mothers as valued resources for prevention strategies. Interventions developed to...
increase family dinner frequency should emphasize the perceived value while decreasing the costs/barriers.

KEYWORDS social marketing, family dinner, focus group, working mothers

INTRODUCTION

Obesity is a primary contributor to morbidity and mortality in the United States and one whose impact begins in childhood (Centers for Disease Control and Prevention 2010). Data from the 2003–2004 National Health and Nutrition Examination Survey (NHANES) showed that 17.4 percent of children ages 2–19 were overweight, a figure that has doubled during the past 20 years (Baskins, Ard, and Allison 2005). Overweight children are twice as likely as their non-overweight peers to become overweight adults, a matter of particular concern as it carries with it an increased risk of chronic diseases (Boutelle et al. 2007). Whereas overweight is the result of an imbalance in energy intake and expenditure, its overall etiology is multifactorial (Hood et al. 2000). Although biological determinants influence childhood obesity, factors at the social and societal levels do so as well (Boone-Heinonen, Gordon-Larsen, and Adair 2008). In this arena, both dietary intake and physical activity play roles in excess weight gain as children develop and these factors are influenced by family, peers, and friends who may serve as role models, influence social norms, or provide social support (Story et al. 2008). Dietary alternatives to the family meal, such as fast food, have been shown to increase the risk of childhood obesity (Neumark-Sztainer et al. 2003; Veugelers and Fitzgerald 2005).

Identifying avenues for interventions and prevention strategies is an important task for both exploratory research and the development of community-based prevention programs. Research studies on childhood obesity and diet imply that practical and creative strategies are needed to increase the frequency of the family dinner at home to improve children’s dietary intake (McClusky, Edelfsen, and Olson 2008; Fulkerson, Neumark-Sztainer, and Story 2006; Crossman, Sullivan, and Benin 2006; Lazarou, Kalavena, and Matalas 2008). Therefore, this research study explores the family dinner and strategies among working mothers that may facilitate the behavior. Whereas the concept of the mother having sole or even primary responsibility for meal preparation may seem archaic to some contemporary adults, in a multi-state study of eating patterns among adolescents, mothers indeed cited themselves as having primary responsibility for dinner preparation (McClusky et al. 2008). Because this belief still has widespread validity, mothers were the priority audience for this study.
Just as overweight tracks into adulthood, nutrient intake tracks from preschool into the school years (Larson et al. 2008). Children who eat fewer family meals are more likely to be overweight during their elementary school years (Gable, Chang, and Krull 2007). Moreover, children may begin to have less physical activity as early as the 3rd grade (Troost et al. 2002) and fewer meals with the family at about the same age (Feldman et al. 2007) thereby placing them at risk for obesity. Therefore, the years immediately preceding and following may be critical ones for intervening. Families are a central influence in children's lives and children rely on parents to meet their basic needs, one of which is food preparation. Whereas parents are not the only influence on children's food consumption, they do usually buy, prepare, and serve the food consumed in the household, particularly that consumed by younger children (Institute of Medicine 2004; Gable et al. 2007); therefore, they have a substantial influence on what children eat and how much of it they eat. The family environment also influences children's eating behaviors (Crockett and Sims 1995; van der Horst et al. 2007). Gross and colleagues (2010) found that family and the home environment were the primary explanatory variables in fourth- and fifth-grade student fruit and vegetable consumption and advocate for meal planning in the home. Parents further shape the dietary patterns of children through role modeling, attitudes and values about dietary intake, food availability, and family meal frequency (Feldman et al. 2007; Young et al. 2004; Tibbs et al. 2001; Utter et al. 2008; Boutelle et al. 2007; Galloway et al. 2005; Boutelle et al. 2003).

Dietary behaviors contribute to obesity but are modifiable (Satia, Galanko, and Siega-Riz 2004). Parental modeling and food consumption has shown positive results when assessing maternal/child food behaviors. This relationship is especially important inasmuch as maternal obesity is a well known predictor of children's weight (Crossman et al. 2006). Other studies have also reflected on the association with maternal eating habits and those of the children (Boutelle et al. 2007). Fisher and colleagues (2001) found a positive association between maternal calcium intake and daughter's intake through consumption of milk. Other work found that mothers' fruit consumption predicted their children's fruit consumption (Gibson, Wardle, and Watts 1998; Tibbs et al. 2001; Coon et al. 2001). Although fruit and vegetable consumption is only one way to modify diet for decreasing obesity, it has been found that a relatively substantial portion of fruits and vegetables occur during dinner (Baranowski et al. 1997). In a longitudinal study using data from the National Longitudinal Survey of Youth, 1997, Sen (2006) found that adolescent body mass index (BMI) increased as the family dinner decreased. Additionally, the growing number of working mothers may be linked to overweight and obesity in their children (Moira and Li 2010). Conversely, parental influence also can have negative effects, whereby a parent's negative food consumption and attitude can lead to their child
modeling these negative health behaviors and attitudes as well (Brown and Ogden 2004).

Family meals not only relate to diet, but are associated with oral discourse about healthful eating, greater consumption of fruits and vegetables, overall socialization, and improved psychological well-being (Neumark-Sztainer et al. 2008; Eisenberg et al. 2004; Fulkerson et al. 2006; Gable et al. 2007; Sobal and Nelson 2003; Neumark-Sztainer et al. 2003; Larson et al. 2007; Rockett 2007; Videon and Manning 2003; Boutelle et al. 2001; Fulkerson et al. 2010). Despite its relationship to healthier eating, family dinners may decline in frequency as children get older (Story et al. 2008). Whereas 51 percent of 9-year-olds report eating dinner with the family, just 35 percent of 14-year-olds report doing so (Feldman et al. 2007).

Mothers have had primary responsibility historically for family dinner preparation and continue to be the most frequent preparer of meals (Gustafson 2010; Gillman et al. 2000). However, an estimated 74 percent of mothers with school-aged children report being employed outside of the home because of economic necessity or workforce opportunity (Jenkins and Horner 2005; American Academy of Pediatrics 2003). This proportion represents a 64 percent increase in the last two decades. Because of this change in employment status, families are relying increasingly on childcare outside of school time. In addition, due to work schedule demands, commute time, and children’s extracurricular activities, more families are opting for the convenience of fast food to replace the traditional home-cooked family dinner (Boutelle et al. 2007; French et al. 2001; French, Harnack, and Jeffery 2000; Satia et al. 2004). Moreover, extracurricular activities have been extended into the evening hours to accommodate their increased popularity among children and youth. Therefore, initiatives that increase the frequency of a structured family dinner must be undertaken with working mothers and youth activities in mind.

Project Background

The Linking Work with Community and Family Health: The Importance of the Family Dinner project (LINK project) is a collaborative effort between youth-based organizations and a university in the southeastern United States. Its purpose is to predict outcomes associated with the family dinner through an interdisciplinary collaboration of public health, anthropology, and psychology researchers. For this study, the family dinner is defined as a dinner eaten at a dinner table with family members in one’s home. More recently the family dinner has been defined as having at least one parent available at the dinner and no mention of location of dinner (Fulkerson et al. 2010). One facet of the LINK project, the focus of this paper, was qualitative research to explore factors associated with the family dinner among working mothers with children 8 to 11 years of age. This age range of children was chosen
based on understanding that prevention issues regarding obesity need to start in the pediatric age range and this is also a vulnerable time for children to become obese (Moya 2008; Trost et al. 2002). Healthy habits begin early in life and understanding the viewpoint of working mothers will help to guide prevention strategies that motivate and empower caretakers (Vaughn and Waldrop 2007). Research that assesses factors that create, communicate, and deliver value regarding the family dinner is important as it can identify leverage points for promoting frequency of family dinners, and in turn, improve dietary intake and favorable eating patterns among children and youth. Maternal authoritative parenting style has been linked to increased intake of fruits and vegetables furthering interest in understanding mother’s perceptions of the family dinner (Lytle et al. 2003).

PURPOSE OF THE STUDY

This study explored factors associated with the family dinner among working mothers with children 8 to 11 years of age who attended activities sponsored by local youth-based organizations. Research questions included:

- How do working mothers perceive the family dinner?
- What perceived benefit can be made salient to increase the frequency of the family dinner among working mothers?
- What barriers do mothers perceive regarding having regular family dinners?
- What sources are deemed trustworthy for making the family dinner time easier?
- How can working mothers receive information about ways to make the family dinner easier?

Conceptual Framework

A social-marketing approach was used for this study because it applies marketing principles to influence voluntary behavior change in a specific audience (Kotler, Roberto, and Lee 2002). Social marketing has been used to influence such behaviors as tobacco use, littering, bike helmet use, breastfeeding, and physical activity (Kotler et al. 2002). This framework focuses on the needs, wants, beliefs, problems, concerns, and behaviors of the priority population (Kotler et al.). Thus, the framework was appropriate to assess factors that create, communicate, and deliver value about the family dinner.

Social marketing also views the priority audience at the center of an exchange process that involves four key concepts: product (the desired behavior being promoted and the benefits it offers adopters); price and other factors (social, emotional, and monetary costs exchanged for the product’s
TABLE 1 The Social Marketing Mix—Increasing Family Dinner among Working Mothers with Children 8 to 11 Years of Age

<table>
<thead>
<tr>
<th>Marketing mix element</th>
<th>Definition</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Product</td>
<td>The behavioral offer made to the priority adopters</td>
<td>Beliefs about the family dinner; the benefits the family meal offers to the priority audience</td>
</tr>
<tr>
<td>Price</td>
<td>The costs that priority adopters have to bear and barriers they have to overcome</td>
<td>Barriers to family dinner including beliefs, attitudes, time, money, resources, etc.</td>
</tr>
<tr>
<td>Place</td>
<td>The channels by which the change is promoted and the places in which the change is supported and encouraged</td>
<td>Where the behavior will be practiced by the target market</td>
</tr>
<tr>
<td>Promotion</td>
<td>The communication means by which the change is promoted to the priority audience</td>
<td>Message strategies that can be used to facilitate the exchange of the behavior's benefits with other factors that may deter adoption</td>
</tr>
</tbody>
</table>

benefits); place (where the target behavior is practiced and partners can support adoption); and promotion (communication strategies used to activate the intended audience). Together, these concepts comprise what is referred to as the “marketing mix” (Kotler et al. 2002).

Formative (i.e., consumer) research is used to understand the priority audience’s aspirations, values, and perceptions of the target behavior’s (i.e., product’s) perceived benefits, costs, and other determinants (Parsons and Brown 2004). Often, consumer research can eliminate or put into perspective less productive avenues that otherwise might comprise interventions designed to change behavior. For example, consumer research for the Florida Cares for Women initiative demonstrated that women’s presumed fears about pain and embarrassment, convenience, clinic hours, and other factors did not distinguish between women who received or did not receive timely mammograms (Brown et al. 2000). Rather, promoting selected consumer-generated benefits garnered through interviews (e.g., promoting early detection and gaining “peace of mind”) were more likely to improve screening prevalence. Derived from commercial marketing strategies, social marketing uses the four-component marketing mix as a guide for exploring consumer behavior. Table 1 shows the marketing mix that guided this study.

METHODS

Study Design

This study comprised a portion of a larger initiative, the LINK project, part of the collaborating university’s Interdisciplinary Initiative on Sustainable Communities in the Humanities and Social Sciences. The larger study
included self-report data collected from mother-child dyads at youth-based organizations. The current study employed purposive sampling of mothers who had completed the self-report survey associated with the larger initiative. Through the larger study, these mothers were identified as working ≥20 hours per week outside of the home and having a child in afterschool care.

Participants
Participants were working mothers with children 8 to 11 years of age who attended activities sponsored by one of 23 youth-based organizations located in a west central Florida county. Four focus group research sites were selected to account for geographic diversity and facilitate a relatively easy commute for working mothers. Whereas the use of four focus groups also was responsive to the available resources for conducting formative research, they ultimately demonstrated the recurrent themes and redundant sufficiency that researchers seek when resources are less restrictive. Recruiters sought mothers who had previously completed the survey noted above. Fifty-seven mothers fit these criteria. Mothers were asked to participate as they arrived to pick up their child. Notes encouraging parents to meet researchers for information concerning the study were placed on the parent/child sign-out sheets. Incentives for participating were described in a recruitment letter and included a gift card and dinner for participating mothers and their children. Additionally, a researcher provided information about the focus groups and the study’s objectives face-to-face. If the parent/guardian was not the mother, then information was sent home with the adult chaperone and a researcher made follow-up phone calls to mothers. Because the research was held at the end of the organization’s normal workday, the organization extended the care of the participants’ children to facilitate focus group administration. Of the 57 eligible women, 24 participated and reported working a minimum of 20 hours outside of the home. Sixteen of the participants were Caucasian, 6 were African American, 1 was Hispanic, and 1 was Asian. Ten of the mothers were single parents and the remaining 14 were married. Additionally, 18 of the mothers had only 1 child and 6 mothers had 2 children.

Procedures
Four focus groups were held between February and April 2008 at youth-based organization sites, enabling researchers to explore key marketing principles associated with participation in the family dinner among these working mothers. Written consent forms were completed by participants prior to initiating the focus groups. Participants were invited to ask questions about the consent form and interview content. Each focus group had a moderator and note taker. Note takers were anthropology doctoral students
trained in both focus group methods and observational studies. Focus groups lasted between 60 and 90 minutes, excluding time for review of the consent forms and serving of meals. Sessions were audio-taped for later transcription. Following each focus group, the note taker and the moderator discussed general themes emanating from the interview. This study was approved by the Institutional Review Board of the sponsoring university.

Data Analysis
Audiotapes of the focus groups were transcribed by two psychology graduate students. Data management was performed using Atlas-ti, version 17.0. Key analytical constructs regarding the criterion-specific behavior (i.e., the family dinner) were derived from the marketing mix. From these constructs, codes were developed based on themes that arose in the focus groups for each of the four constructs. For example, codes relevant to price included themes such as cost of the family dinner, extracurricular activities, and exhaustion. In addition to the principal investigator, two outside examiners coded each transcript to ensure reliability. As new codes had the potential to emerge, continual dialogue ensured consistency and accuracy of coding. The codebook was updated after review of each transcript produced consensus among coders.

RESULTS

Themes
The data analysis revealed several recurrent themes. Representative quotes for each theme, organized by the constructs of the marketing mix, are shown.

The product (implementation of the family dinner) is the behavioral offer made to mothers. The research question to assess the product construct was: “What perceived benefit can be offered to working mothers to increase the frequency of the family dinner?” The following themes emerged:

- Sharing events of the day
- Passing on family traditions
- Role modeling
- Connectedness with children; and
- Time for problem solving

Sharing events of the day
Participants viewed the family dinner as a treasured time for sharing experiences of the day which has the propensity to increase bonding of family members:
Well typically we’re all talking about our day just kind of like everybody else is saying. Ya know, it’s just a time to share and what’s going on.

It’s no cell phones. You have my undivided attention at this point. Anything you want to talk to me about, anything I want to talk to you about, anything. It’s the perfect time.

I would say I think about cooking and, well, cooking or not, still somehow being at home with food at the table and everybody there quiet, all the devices turned off feels like family dinner, communication hour—we actually share.

PASSING ON FAMILY TRADITION

The influence of past family dinners from childhood experiences was significant in determining how the mothers valued the family dinner and wished to continue the same tradition with their children:

There is sort of this, like, the last outpost of something from my past or the past that has shifted culturally that I’m trying to hold on to with dear life, so I guess that’s why I’m trying to have that commitment to “okay, these are the nights I can cook,” and even though I’m exhausted and I’m like, I would so rather just not do that, I guess I also want my daughter to have that cultural experience.

I know for me there were five kids in my family growing up and all seven of us sat down to dinner every night. I try to do that.

I think you also share your heritage. They learn, this is how you make the food and this is how you prepare it, and I hope that they pass it on.

ROLE MODELING

Working mothers emulate the behaviors of their own parents and try to serve as examples or role models for their children, as well:

And a lot of times, like with my daughter, she gets in there and helps me; she’s done with homework and she wants to help. She says: “Mom, where did you learn to cook?” Well, I learned from my mom. “Well I want to learn to cook the way you do.” So it teaches them stuff. And even with my son.

I think having the kids involved, if they know they are making that. They’ll be things that I make, that my son will see I’m doing and he’s like “Oh, I want to help.” I want to do this. If they are a little more involved they have a tendency to eat it because they know they made it.
Yah, my daughter likes to help cook so she usually ends up doing the majority. I show her how and she reads and she does it.

CONNECTEDNESS
The family dinner brings a sense of connectedness with their children to many of the mothers:

But Sunday dinners, we go over to my parents who live in _______ we all sit down together as an extended family. That’s a lot of fun. OK, everyone’s talking. There’s a lot of jokes and laughter usually at our table.

I was going to say I feel more connected. I get to learn about her day and the people she encounters, what kinds of things they do at recess, what kinds of things they do in class, you know, about their social studies . . . lesson of the week or whatever the case may be, how it went, you know?

Brings the family together. Bonding time.

PROBLEM SOLVING
The family dinner provided an opportunity to help solve issues with which the child may be dealing as a result of either school or peer relations:

It can really be anything because you know an issue might come up that you have to address and sometimes some, you know, say, if my daughters had a hard day and well do we wanna [sic] address that now or is that something for after dinner where we can focus in a different way away from the table.

Some days it’s the drama behind the traumatic days. It’s like “you’re nine, are you serious?” Exactly. But to them it’s very, very serious. It’s like they feel like the world is ending. It’s like, okay, we just need to refocus, regroup, rethink, we can get through this.

“But mom, they said this.” “Okay, that’s their opinion. Do you feel that way?” “No mom.” So it’s like you just have to, like, redirect what they’re feeling and say “it’s okay to voice your opinion and say what you feel. Just because that person said it doesn’t mean you have to agree with it, or even like it, and if they’re really annoying just walk away cause they can’t talk by themselves.”

The second construct of the marketing mix, price, consists of the costs that working mothers have to bear and barriers they have to overcome.
to engage in the behavior of interest. The research question that explored the price construct was: “What are barriers of the family dinner to working mothers?” The following themes emerged from data analysis:

- Child extracurricular activities
- Time
- Cost
- Exhaustion/lack of energy; and
- Homework time

**EXTRACURRICULAR ACTIVITIES AND THEIR CONSTRAINTS ON TIME**

Parents valued the exercise that their children receive from extracurricular activities. However, these activities create a barrier and deter working mothers from having a family dinner:

> And then Tuesdays we have Brownies and basketball practice. Dinner is McDonald's. As much as I hate to admit it, I really have no choice. I get out of work at 5 o'clock. I have one that has to be at basketball practice at 6:30, well 6:45, but I drop him at 6:30, and then I have to go to Brownies, and then I go back, and then go back and get her. I just have no choice.

> I think the biggest obstacle—I think all these things would help—but honestly, the biggest obstacle is the schedule, the work, and the kid's extracurricular activities. I mean, in my family that's the biggest barrier.

> Well, for example, we go straight, I don't have time. I actually put my son's basketball clothes in the car—I drop him at the door cause we're friends with the coach, and he's got to go change—then run my daughter to Brownies, then go back and pick [him up]. I mean, on days like that, I could, would do something, I'm just not sure it would solve the problem. I think the problem is lack of time that all family members are home and can sit down and eat a dinner together.

> Increasing extracurricular activities weighed heavily as a barrier to enabling the family dinner, due primarily to the time constraints it posed. Participants felt that there was too little time to accomplish all the needs of the child, house, and provide a consistent family dinner.

> Time. It's just time. I get home usually about 6. The dog has to go out 'cause he hasn't been out since, I run home at lunch and I don't eat lunch, 'cause I run home and let the dog out and come back to work. So
when we get home it’s between 6 and 9 o’clock when she’s supposed to be going to bed.

I think dinner is a lot of time based on the time. . . . How big of a meal you’re cooking, how long it may take, and what else you have going on in the evening, doing rituals, coming home doing homework unless they do it here [after-school program] you still have to review it and then you want your child to kinda calm down.

Yah, by the time you pick up the kids and get home it’s 6 o’clock. They have to go to bed 8:30 or 9 that leaves 2–1/2 hours to get dinner on the table, get homework done, get all cleaned up, and take showers.

**Cost**

Working mothers said that sometimes the cost of grocery items for the family dinner is more than eating out. Participants identified several lower cost meal options at area fast food restaurants as alternatives to the home-cooked family dinner:

- Even the cost of groceries compared to if I buy 2 chops at 6 dollars, if I eat at Piccadilly’s 2 meals is well, in uniform it’s only 10 dollars for both of us so we go by in uniform and I get that discount.

- How about two-dollar Happy Meals at McDonald’s on Wednesday? [laughs]

- . . . and there’s places you can go out that kids eat for free, like Country Buffet, Winner’s Grill . . . [others laugh]

**Exhaustion or Lack of Energy**

Working mothers felt that there were several factors that lead to exhaustion and lack of energy that impede preparation of the family dinner: exhaustion from work, commuting hassles, and dealing with table manners:

- Sometimes you’re like, “I don’t want to make dinner, let’s just get pizza.” You know, I don’t have the mental or physical energy to deal with dinner tonight.

- I’m tired, it’s work [Another mom responds, “Exactly!”]. You know, I have to referee my kids, I have to get stuff, even if I don’t do everything myself I have to give commands, “please go put this on the table.” My son’s 10 and he doesn’t like to listen and ya [sic] know he likes to pretend he can’t hear us. [Others laugh] Maybe it’s because he has his MP3 player in that he can’t hear us. Um, but it’s just more work, after being at work
after having other things that we have to do on the weekends. There’s no, ya know, it’s just, I look at it as another thing to do.

You’re exhausted from fighting traffic all the way home and it’s like, “now I have to start job number 2.”

**Homework Time**

When asked “how the local youth-based organization can help promote the family dinner,” participants overwhelmingly centered their comments on completion of the child’s homework. Although a focus on homework is a usual part of the after school activities, participants felt that an emphatic dedication to this task would lift a tremendous burden and enable them time to prepare a family dinner. Respondents felt that a system is lacking to double check that the homework assignments for the day have actually been completed. Such a system, they felt, would relieve some of the time constraints that impede family dinners:

You know, when he gets his homework done, which he’s done twice this entire school year, it makes such a wonderful evening. There’s no fighting. There’s no “Why can’t I play?” /“School comes first, you have to do your homework.” You know when it’s not done the evening is shot.

If they could do the homework first . . . and then, I love that they have the physical time because they need that. They need to get that out of their energy. It actually helps them build up their appetite and then they can go home and be free, time for dinner, time for bath.

It’s tough ’cause they’ve been sitting in school all day, so you want them to have that outside time to blow off steam and just all this other stuff, but then it’s like you’ve done that,”Can’t you just focus? If you focused for 30 minutes this would be done, ya know, and then you’d have the rest of the evening.”

The construct of place refers to the channels by which the behavior change is encouraged and the venues in which the change is supported. The research question that assessed this construct was: “How do working mothers perceive the family dinner environment?” Overall, the family dinner was idealized as a traditional-style family dinner consisting of family members sitting down together at a dining room table enjoying a home-cooked meal. Working mothers characterized family dinners as falling into two primary categories: (1) dinner at home at the dining room table with the television on, and (2) dinner at home at the dining room table without television:
But dinner, we eat, we have an actual kitchen table in the kitchen, there is no TV in there, there’s a radio. Very rarely do we have the radio on during dinner.

We’ve got the TV in the kitchen, we’ve got the TV in the living room, and my husband and I have tried so hard to be like, “Okay, we’re going to sit down and eat dinner as a family,” and it usually lasts for about 3 months and then it’s, like, thrown out the window like it never even existed.

Um, sometimes we eat with the TV on so sometimes she’s watching the television. It depends on if she can’t pay attention long enough to eat or not whether we set things on or talk or not, whether the set stays on.

The construct promotion is the means by which behavior change is communicated to the priority audience. Research questions that explored the concept of promotion included “How can working mothers receive information about ways to make the family dinner time easier?” and “Who would working mothers trust for information about making the family dinner time easier?” Information channels such as the Internet, email exchange, school communications, and family oriented magazines were the primary means participants mentioned as ways to communicate and promote the family dinner:

Well I get Cooking Light, the magazine, and they do recipes and nutrition both.

I’m more likely to read an e-mail than something that comes in the regular mail. The regular mail I just go through. If it’s not a bill I just throw it away. So e-mail.

Other experienced moms . . . do a poll, and get a series of moms to give their inputs of quick meals, things that work for them, that benefit them, and compile it together [or] . . . Google it and say [these are] testimonies of other moms.

Trusted sources of information identified by participants consisted of other working mothers because of their ability to relate to the hectic lifestyle. Additional trusted sources were the child’s teachers, university-based experts, youth-based organization personnel, and pediatricians. Information coming from these sources was viewed as valuable and worth taking the time to review:

I think the backbone of motherhood is, like, we meet other interesting women in our lifetime and say, “Oh, I’ve done it this way, and you
have this wonderful idea,” and they share their ideas and things that have helped them just like smooth sailing, ’cause every woman has gone through a point in their [sic] life where they were doing children, work, and school, and so somebody has an idea of when they were in that time-span of their life, how they performed things and got it done and it worked.

Some of the information they do get in school I do find helpful.

We actually took a class that the pediatrician recommended. It was, um, considered “Weight Watchers for children,” although it wasn’t called that. It was to teach the parents and [name of participant's daughter] how to eat healthy lifestyle, how to maintain a healthy lifestyle.

DISCUSSION

A social marketing framework guided exploration of factors associated with the family dinner in a sample of working mothers who had children in after school programs at youth-based organization sites. Researchers used the marketing mix to determine the “offer” that might best facilitate participation in the family dinner by lowering “costs” for working mothers and improving the overall value of the “exchange.”

Benefits identified by mothers participating in this study included passing on family tradition, sharing experiences of the day, role modeling, and the ability to leverage the family dinner as an opportunity to help children solve problems they may have encountered. Neither economic factors nor food content emerged as dominant themes related to benefits of the family dinner at home. However, economic factors, and arguably, ergonomic factors were cited as reasons for fast food consumption. The barriers to be offset may include children’s extracurricular activities, time constraints, monetary and other costs of preparing a meal, and parental exhaustion. Working mothers indicated that they would trust information that was disseminated by other working mothers, teachers, and pediatricians. These sources of information delivery may improve adoption of the family dinner and foster acceptance of its benefits. Modes of information dissemination that would best reach the mothers included email, Internet sites, and family centered magazines.

Implications for Changing the Status of the Family Dinner

According to the Society for Research in Child Development frequent family mealtimes improve children’s health outcomes, and families that regularly dine with their teens tend to eat more fruits and vegetables (Fiese 2008). Meals prepared at home also tend to be lower in calories and fat and contain
higher levels of dietary calcium than restaurant meals (Guthrie, Lin, and Frazao 2002; McClusky et al. 2008). Furthermore, teenagers who eat five or more meals a week with their families are less likely to smoke cigarettes or marijuana and to consume alcohol (Boutelle et al. 2007; Eisenberg et al. 2004).

Most family meals last, on average, just 18 to 20 minutes (Fiese 2008). Findings from the current study corroborate previous evidence that families are exasperated in their efforts to juggle the demands of work, school, and extracurricular activities. Because of a lack of direction or strategy for carrying out a healthier option, families often choose convenience at mealtime, a decision that, as demonstrated above, may be contrary to child health promotion. Over the past 25 years, the proportion of the American food dollar spent on meals away from home has increased from approximately 26 percent to more than 40 percent (Fiese 2008). Whereas meals eaten away from home may be able to offer the same important communicative function that families need, as well as provide opportunity for teaching social skills and fostering independence, fulfilling the nutritional elements may be more difficult. For example, an Atlanta-based study of 217 fast-food and sit-down restaurants found barriers to selecting a healthy meal based on available information (Saelens et al. 2007). Moreover, parents may be less able to direct portion sizes when away from home, a counterproductive element in the effort to control obesity.

Whereas there are numerous health reasons for the family dinner, health reasons alone have been inadequate to motivate regular and frequent meal-times despite the well publicized childhood obesity epidemic. Consequently, non-health related incentives, such as the possibilities that emerged in the current study, need to be given more extensive consideration.

Given that working mothers value the family dinner, it should be considered one avenue that may help reverse the trend of childhood obesity through healthier eating. Using a marketing mindset, the family dinner can be promoted by individuals and community organizations as an avenue to bond and connect with children and an opportunity to share traditions as opposed to viewing the family dinner primarily in a nutritional or health promotion context or a time to teach table manners (Gable et al. 2007; Videon and Manning 2003; Eisenberg et al. 2004). This social focus puts more emphasis on the benefits of the family dinner as the mothers themselves described. Promotional materials and interventions to increase the frequency of the family dinner should highlight the perceived value among members of the priority population instead of highlighting the potential health benefits. Working mothers deemed these values as motivators to have the traditional family dinner.

Interventions also should take into account the noted barriers faced by working mothers. As the current study revealed, time, cost, and lack of energy are significant impediments. Thus, interventions should provide ideas
or activities for family dinners that do not require lengthy preparation and are low in cost. In addition, results of this study support the continuation of daily homework help by the youth-based organizations as this assistance is highly valued by parents and minimizes one barrier to preparation of the family dinner.

Lastly, findings suggest that promoting the family dinner should focus on exchanges between working mothers (e.g., recipe exchanges for low-cost, quick, and hassle-free dinners) and include parent/child activities (including spouses, when applicable) focused on preparing meals together, such as family cooking events. For example, interventions could include monthly dinner events where each month a different low-cost, user-friendly, and low-effort dinner is highlighted. The after-school centers would be prime locations for such promotions. Some authorities have suggested other promotional venues such as shopping malls, supermarkets, libraries, church bulletins and parent–teacher association (PTA) newsletters, and community events calendars in the newspaper or on the radio (Kotler et al. 2002).

An additional activity is the compilation of a recipe book or guide aimed at working mothers and that further emphasizes the low-cost and low-effort approach. In addition, the recipe book could include “getting to know you” questions that the family can discuss together.

The current study had several methodological strengths. First, it employed the social marketing framework to determine benefits, barriers, and promotional strategies targeting the working mother. Secondly, it encouraged community partnership between a university and youth-centric organizations to promote and sustain program planning. Too often, programs end when start-up funds have been exhausted and cannot be replenished. Community-based programs have the ability to draw from many resources for sustainability. Finally, this study fills a void in the literature of understanding the context of family meals eaten in the home (Gable et al. 2007).

The study also is not without limitations. Generalization of study findings to other settings must be done cautiously. The current study included a modest sample size and a restricted geographic area. This study also was limited to working mothers with children who frequent youth-centric organizations’ after school programs. Other explorations with mothers not employed outside of the home, working fathers, and single and dual parent families may be warranted for a more extensive view of the family dinner issue.

Future research might include identifying other motives for the benefits of the family dinner identified in this research, and better explication of the thresholds for the barriers that working mothers face. It also may involve implementing a community-based social marketing campaign to garner feedback about modifying or refining the “offer.” Future research
ought to examine the expectations of other household members—spouses, significant others, and youth themselves—regarding whether the mother or female head of household should have primary responsibility for preparing the family dinners. The family dinner can promote healthful eating habitat one environmental level that have the potential to translate to a greater proportion of children and youth whose growth and development is fostered more optimally.

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