

## Capstone for Impact Submission | GY2019

---

**Project Title:** Do children with obesity have worse table manners? Associations between child table manners, weight status and weight gain

**Student Name(s):** Briones, Naomi

**Advisor Names(s):** Maggie Riley

**Branch:** Patients & Populations

**Path of Excellence:** Global Health Disparities

**Handover/Transition:**

If this project can be continued by another UMMS student, you may contact them at the following email address/phone number (N/A if project cannot be handed over): **N/A**

---

**Summary:**

Teaching children “proper table manners” has been proposed as an obesity prevention strategy. In order to appropriately develop child obesity interventions focusing on shaping table manners, it is first essential to understand correlates of these behaviors. To our knowledge, no studies have observationally assessed table manners in children, nor parental attentiveness to child table manners.

Our objective was to examine correlates of child table manners and to examine the association of child table manners with child obese weight status and prospective change in child body mass index z-score (BMIz). Our study found that children with obesity did not have worse table manners than children without obesity. To the contrary, this study found that children with worse table manners had a decline in their BMIz from ages 5 to 7 years.

The finding that children with obesity did not have worse table manners than children without obesity is important for several reasons. First, it calls into question the validity of the stereotype and stigma surrounding obesity and table etiquette. Secondly, the fact that there was no difference in table manners between children with and without obesity is important for obesity interventions focusing on table manners, as other behaviors may be more productive to focus on. Lastly, it is notable that poorer table manners at baseline were associated with a decrease in child BMIz per year over time.

The stereotype that children with obesity have worse table manners was not supported by current findings. Obesity interventions that focus on improving table manners may be unintentionally perpetuating a stereotype and stigmatizing obese children and their parents.

**Methodology:**

Methods: Mother-child dyads (N = 228) participated in a videotaped laboratory eating task with cupcakes. Coding schemes to capture child table manners (making crumbs, chewing with mouth open, getting food on face, shoving food in mouth, slouching, and getting out of seat), and maternal attentiveness to child table manners, were reliably applied. Anthropometrics were measured at baseline and at follow-up two years later. Regression analyses examined the association of participant characteristics with child table manners, as well as the associations of child table manners with child obese weight status, and prospective change in BMIz/year.

**Results/Conclusion:**

Results: Predictors of worse child table manners were younger child age, greater cupcake consumption, and higher maternal attentiveness to child table manners. Worse child table manners behaviors were not associated with child obese (vs. not) weight status, but were associated with a prospective decrease in BMIz/year.

Conclusions: Worse child table manners are not associated with child obese weight status, but are associated with a prospective decrease in BMIz/year. Obesity interventions to improve table manners may be perpetuating unfavorable stereotypes and stigma. Future work investigating these associations is warranted to inform childhood obesity guidelines around table manners.

**Reflection/Lessons Learned:**

Overall, the project was a significant growth and learning opportunity for me from start to finish. It certainly made me excited about clinical research in my long-term professional trajectory.

In terms of writing up the paper and submitting, I found this to be eye-opening, both in terms of introducing me to professional scientific writing, but also the process of adhering to journal requirements, making revisions, re-submitting and the aftermath in terms of additional publishing possibilities that can present themselves once a paper is submitted. I feel more prepared for various case reports and other write-ups I have since been working on and more confident in my framework to carry out clinical research in the future.