

# **3 Cheers for the Early Years – Picky Eating Class Evaluation**

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# **Executive Summary**

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## **Background**

The Calgary Health Region's Picky Eating class is a 2-hour facilitated workshop intended to help parents and caregivers with toddlers and preschoolers learn ways to promote healthy eating habits and active living habits for life. It has been running since October 2003. The class is offered at no cost, 3 to 4 times/month at various locations in all quadrants of the city and various times of the day. A registered dietitian facilitates the class and is available to answer parents' questions relating to feeding relationship.

## **Evaluation Approach**

The purpose of the evaluation is two fold: one is to determine if the Picky Eating class had an impact on parents' knowledge and behavior related to the feeding relationship; the second is to provide suggestions for future community-based feeding classes. From Feb. 1, 2007 to Sept. 30, 2007, surveys were distributed to all participants at the end of each Picky Eating class to assess participants' self-reported knowledge change in feeding relationships before and after the class and their intentions for behavioral change. All participants were also invited to participate in a follow-up telephone interview three months following class participation. The purpose of the follow-up telephone interview was to further assess behavioral changes as a result of the class.

## **In-class Survey Results**

In total, 150 participants filled out the questionnaires. Overall, the facilitator's presentation, knowledge and organization were valued by the majority of participants. The majority of participants felt that the materials used in the class were informative and useful, the class location and time were good. Over 82% of participants felt that a registered dietitian made a difference in facilitating the class.

There was a significant increase in participants' perceived level of knowledge associated with feeding relationships as a result of the Picky Eating Class. In particular, the highest increase is in the topic of "How Much" (important not to control amounts children eat). All of the participants reported that they planned to use or increase their use of at least two practices recommended by the class. The practice reported to be most likely adopted or increase use by the participants was "I will provide my child with food every 2 to 3 hours."

What the participants liked most about the class was the information offered by the class. The topics that participants would like to see included in the future class included recipes and cooking ideas, list of high nutrition snacks, nutrition values, healthy school lunch, etc. Suggestions for improvement offered by participants included longer time for each class, more comfortable classroom, microphone for instructor, recipes and cooking ideas, etc...

## **Telephone Survey Results**

In total, 39 participants finished the telephone survey. All of the participants reported that they had tried at least two practices recommended by the class during the

past three months following the participation of the class. The practice reported to have been most often tried by the participants was “provide child with 2 to 3 cups of milk per day”. 73.7% of participants indicated that the variety of their child’s diet had improved since they attended the class, and 73.7% mentioned that mealtime was less stressful/more enjoyable now.

The majority of the participants in the telephone survey thought that class’s handouts were helpful; 76.2% (N=21) indicated that information sheet of “Food Serving Sizes for Children 1 to 5 Years” was most helpful in the package.

### **Comparison between In-Class Survey and Telephone Survey**

There was no statistically significant difference in demographic characteristics between the sample in in-class survey and the sample in telephone survey.

The top three practices with more discrepancy between the participants’ intentions to change reported in in-class survey and the changes they actually made reported in telephone survey were: (1) avoid preparing him his favorite foods to ensure he eats something; (2) increase the number of meals that we have together at the table as a family; and (3) limit child to a maximum of ½ cup of unsweetened juice per day.

### **Recommendations**

1. Analyze the long-term effects of the class.
2. Consider adding information of barriers in implementing the recommended practices in Picky Eating class.
3. Provide more information about healthy recipes/cooking ideas. Promotion of Grab ‘N Know Kits, a resource from 3 Cheers, is recommended.
4. Evaluate Adapted Picky Eating program to examine whether the Adapted Picky Eating has met the needs from diverse populations, including lower income, less educated and recent immigrants, on the issue of picky eating.
5. Analyze the findings from Parenting Needs Assessment that will be conducted by 3 Cheers for the Early Years. The findings from the assessment may help the Picky Eating program better understand diverse populations’ needs and challenges and strategically improve current program or plan other programs that are culturally relevant and meaningful for diverse populations.

## **Acknowledgements**

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I would like to express my sincere gratitude to Cheryl Ryan, Maureen Devolin, all Picky Eating Class educators and members of the Improved Physical Health Outcomes Committee and 3 Cheers Steering Committee for their collaboration with this evaluation. Also many thanks to Jaime Paget for helping collect the data.

## Table of Contents

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<b>Executive Summary</b> .....	<b>1</b>
<b>Acknowledgements</b> .....	<b>3</b>
<b>Table of Contents</b> .....	<b>4</b>
<b>List of Figures</b> .....	<b>6</b>
<b>List of Tables</b> .....	<b>7</b>
<b>Introduction</b> .....	<b>8</b>
<b>Purpose of Evaluation</b> .....	<b>10</b>
<b>Evaluation Questions</b> .....	<b>10</b>
<b>Evaluation Methods</b> .....	<b>11</b>
<b>Sample and Data Collection</b> .....	<b>11</b>
<b>Data analysis</b> .....	<b>12</b>
<b>Results: In-Class Survey</b> .....	<b>13</b>
<b>Respondent Demographics</b> .....	<b>13</b>
<b>Usability and Satisfaction</b> .....	<b>17</b>
<b>Impacts of the Class</b> .....	<b>19</b>
Knowledge Change.....	19
Intentions to Change .....	20
Statements related to practice .....	20
Statements related to individuals .....	21
<b>Comments on Class</b> .....	<b>22</b>
<b>Results: Telephone Survey</b> .....	<b>25</b>
<b>Respondent Demographics</b> .....	<b>25</b>
<b>Usability and Satisfaction</b> .....	<b>26</b>
<b>Impacts of the Class</b> .....	<b>26</b>
Behavior Change.....	26
Statements related to practices.....	26
Statements related to individuals .....	27
Other Behavior change .....	28
Other Impacts.....	28
<b>Feedback on Package of ‘Picky Eating’ Information</b> .....	<b>29</b>
<b>Comparison between In-Class Survey and Telephone Survey</b> .....	<b>32</b>
<b>Demographic</b> .....	<b>32</b>
<b>Usability</b> .....	<b>34</b>
<b>Impacts of the Class</b> .....	<b>34</b>
<b>Discussion</b> .....	<b>36</b>
<b>Knowledge Change</b> .....	<b>36</b>
<b>Intention to Change and Behaviour Change</b> .....	<b>37</b>
<b>Culture Issues</b> .....	<b>38</b>
<b>Feedback on Information Sheet and Class Re: Serving Sizes</b> .....	<b>39</b>
<b>Suggestions for Improvement</b> .....	<b>40</b>

<b>Limitations .....</b>	<b>40</b>
<b>Recommendations.....</b>	<b>42</b>
<b>References.....</b>	<b>43</b>
<b>Appendix A: Cover Letter in In-Class Survey.....</b>	<b>44</b>
<b>Appendix B: In-Class Survey .....</b>	<b>45</b>
<b>Appendix C: Telephone Survey.....</b>	<b>48</b>

## List of Figures

---

Figure 1: Participant's Age (N=148).....	13
Figure 2: Number of Children in the Household (N=136) .....	14
Figure 3: Participant's Marital Status (N=148).....	14
Figure 4: Participant's Education Level (N=144) .....	15
Figure 5: Participant's Household Income (N=146) .....	15
Figure 6: Where Do You Live in Calgary (N=147).....	16
Figure 7: How Did You Find About This Class? (N=146).....	17
Figure 8: Likelihood of Participants to Adopt or Increase Use of Practices (N=148).....	22
Figure 9: Percentage of Participants Adopted or Increased Use of Practices (N=37).....	28
Figure 10: How Helpful Was the Entire Package? (N=38) .....	30
Figure 11: Which Information Sheet is Most Helpful/Unhelpful? .....	31

## List of Tables

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Table 1: Participants' Ratings for Usability and Satisfaction of Picky Eating Class. ....	17
Table 2: Qualitative responses to "Does it make a difference to you that this class was presented by a registered dietitian?" .....	18
Table 3: Participants' Level of Knowledge Before and After Attending the Class.....	19
Table 4: Participants' Intentions to Change Regarding the Recommended Practices.....	20
Table 5: What were the three things that you like the most about the class? .....	22
Table 6: Participants' Behavior Change Regarding the Recommended Practices .....	26
Table 7: How Likely Are You to Try in the Future? .....	27
Table 8: What was the single most important thing that you learned in this class? .....	29
Table 9: Comparison of Demographics Between In-Class and Telephone Surveys .....	32
Table 10: Participants' Intentions and Behavior Changes .....	35

## Introduction

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Parents often experience challenges in feeding their toddler and preschooler including picky eating, refusing new foods, child not eating vegetables, drinking too much milk or juice, and concerns about the child eating too much or not enough. These challenges may result in parental stress, and compensatory feeding strategies that impair the development of healthy eating habits. It is important for parents to realize that many of their concerns are the result of normal child development. Addressing these concerns in a group setting is thought to help normalize toddler and preschooler feeding behaviors, ease the stress around feeding and parenting a toddler or a preschooler, and help connect parents to each other.

The Calgary Health Region's Picky Eating class, formerly known as Snacktivity, is a facilitated workshop intended to help parents and caregivers with toddlers and preschoolers learn ways to promote healthy eating habits and active living habits for life. Most of the concepts provided in the class come from Ellyn Satter's books, "Child of Mine: Feeding with Love and Good Sense" (Satter, 1991), "How to Get Your Child to Eat - But Not Too Much" (Satter, 1987), and "Your Child's Weight: Helping Without Harming" (Satter, 2005). In addition to the books, ongoing journal articles and publications from Ellyn Satter have also been used. The Picky Eating class focuses on mealtime struggles and strategies for developing a healthy feeding relationship. The objectives of the class are:

- 1) Parents and caregivers will learn to help form a positive feeding relationship with children.
- 2) Using the developmental stages of feeding, the class will better prepare participants with an understanding of what to expect when feeding children.

- 3) Suggestions for change around feeding children are also provided. The class looks at ways to cope with various feeding issues such as picky eating, refusal of foods, strong preferences, drinking well versus eating well, how to help children eat new foods, and how to make one meal that everyone will eat.

The Calgary Health Region provides funding for the Picky Eating Classes through 3 Cheers for the Early Years and the Nutrition department within Healthy Living. The classes are facilitated through community partnerships with organizations that provide space at no cost, complete class registrations and participate in program marketing. Picky Eating classes have been running since October 2003. Currently, the class is offered at no cost, 3 to 4 times/month at various locations in all quadrants of the city and various times of the day. A registered dietitian facilitates the class and is available to answer parents' questions relating to feeding relationship.

## **Purpose of Evaluation**

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The purpose of the evaluation is to provide information about whether the Picky Eating Class accomplished what it was designed and developed to accomplish.

Specifically, this evaluation will:

- 1) determine if the Picky Eating Class had an impact on parents' knowledge and behavior related to feeding relationship; and,
- 2) provide suggestions for future community-based feeding classes.

## **Evaluation Questions**

The following evaluation questions have been identified.

- 1) Do parents report improved knowledge and skills associated with feeding relationship as a result of attending the Picky Eating class?
- 2) Do parents report any behavior change based on the concepts they learned from class?
- 3) What are parents' perceptions of usability of the class's handouts?
- 4) What are parents' perceptions of facilitator's overall presentation, knowledge and organization?

## **Evaluation Methods**

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Formative and summative evaluations were conducted using non-experimental designs. Parents and caregivers who attended the Picky Eating class were invited to participate in the evaluation of the class using survey questionnaires at the end of the class to assess participants' knowledge change in feeding relationships before and after the class. In addition, a follow-up telephone survey was used to elicit participants' behavioral changes as a result of the class.

### **Sample and Data Collection**

Convenience sampling was used. Parents and caregivers who voluntarily attended the 2-hour Picky Eating class from Feb. 1, 2007 to Sept. 30, 2007 were asked by the instructor to fill out a 5-10 minute self-report survey questionnaire after the end of the class. A cover letter (Appendix A) which explains the evaluation, gives instructions on how to fill out the questionnaire and how to return it, describes "confidentiality/anonymity", and states that returning the questionnaire implies consent to the use of the information for evaluation purposes was distributed to all participants along with the questionnaire (Appendix B). After the participant finished the questionnaire, he/she was asked to put it in the envelope provided and seal it. The instructor then collected all the envelopes from the participants, put them in a big envelope and sealed it. So that participants were aware that the instructor would not be viewing this information. All respondents were invited to participate in a follow-up telephone interview at the end of the questionnaire,

A telephone interview with the average length of about 5 to 10 minutes was conducted for all consenting participants and was held three months following class participation. Five attempts were made to contact the potential respondent, including three attempts during evening hours (5:00 p.m. to 9:00 p.m.), one morning (8:00 a.m. to 12:00 noon), and one afternoon (12:00 noon to 5:00 p.m.) call. If parents couldn't be reached after five attempts, they were considered unable to be located and no further effort was made to contact them.

In the telephone interview, the purpose of the evaluation, the fact participation is voluntary, the time commitment being requested, and the manner in which “confidentiality/anonymity” will be guaranteed was described verbally by the interviewer. Only after the respondents gave verbal indication of his/her consent to participate, did the interviewer continue the interview. The script and the questionnaire used in telephone follow-up survey are found in Appendix C.

### **Data analysis**

Descriptive statistics were generated using means, medians, and frequencies for each of the variables. Qualitative analysis was used to determine themes. Paired t-tests were conducted to determine whether there was significant difference in the ratings of the class between the in-class survey and the telephone follow-up survey. Chi-square tests were conducted to examine the demographic difference between the sample of the in-class survey to the sample of the telephone survey. All statistical analyses were performed using SPSS 13.0 statistical package.

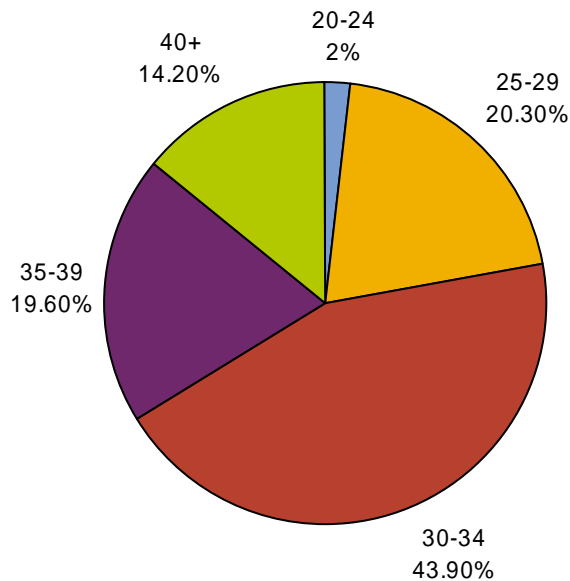
## Results: In-Class Survey

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### Respondent Demographics

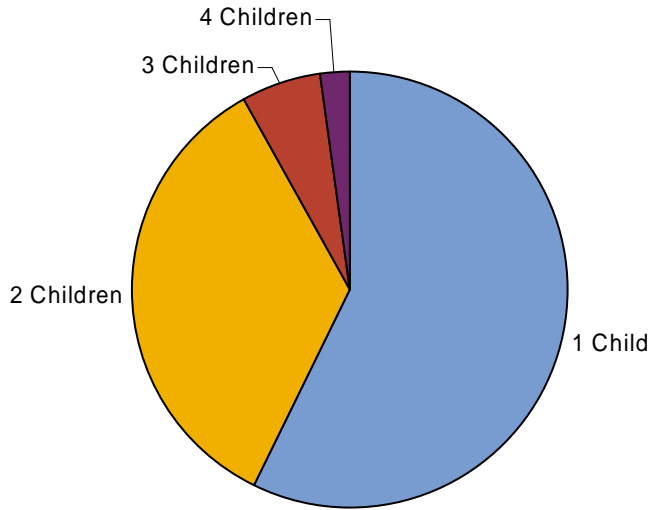
In total, 150 participants who attended the Picky Eating Class between Feb. 1 2007 to Sept.30, 2007 filled out the questionnaires. The majority (95.2%, N=147) of the participants were parents and 86.9% were mothers and 8.3% were fathers (N=145). When asked about their age, the majority of participants indicated their age fell between the range of 30 to 34 years (43.9%), followed by 25 to 29 years (20.3%) and 35 to 39 years (19.6%) (N=148).

**Figure 1: Participant's Age (N=148)**



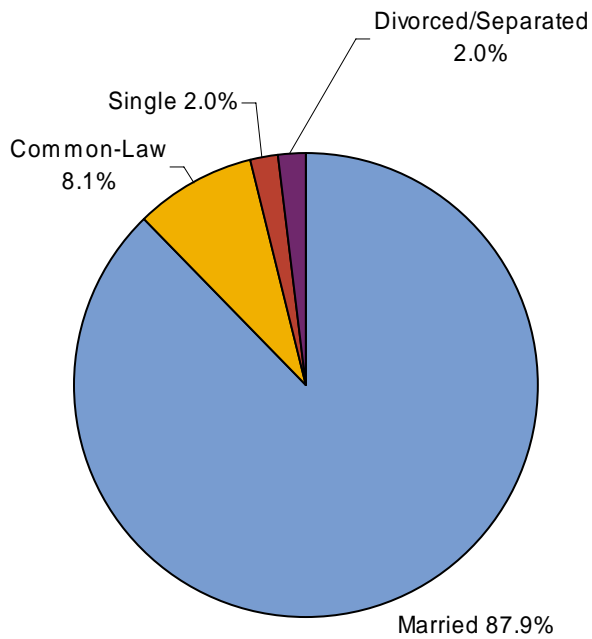
The majority of participants (57.4%) had one child in their household, followed by two children (34.6%). 2.2% had four children in their household. The mean age of all children was 25.69 months.

**Figure 2: Number of Children in the Household (N=136)**



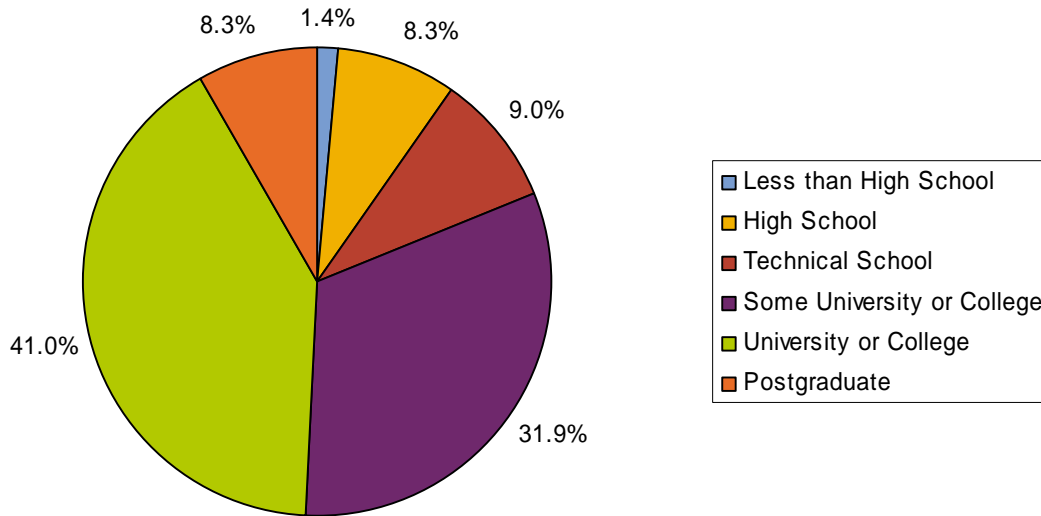
The majority of respondents reported being married (87.9%, N=148).

**Figure 3: Participant's Marital Status (N=148)**



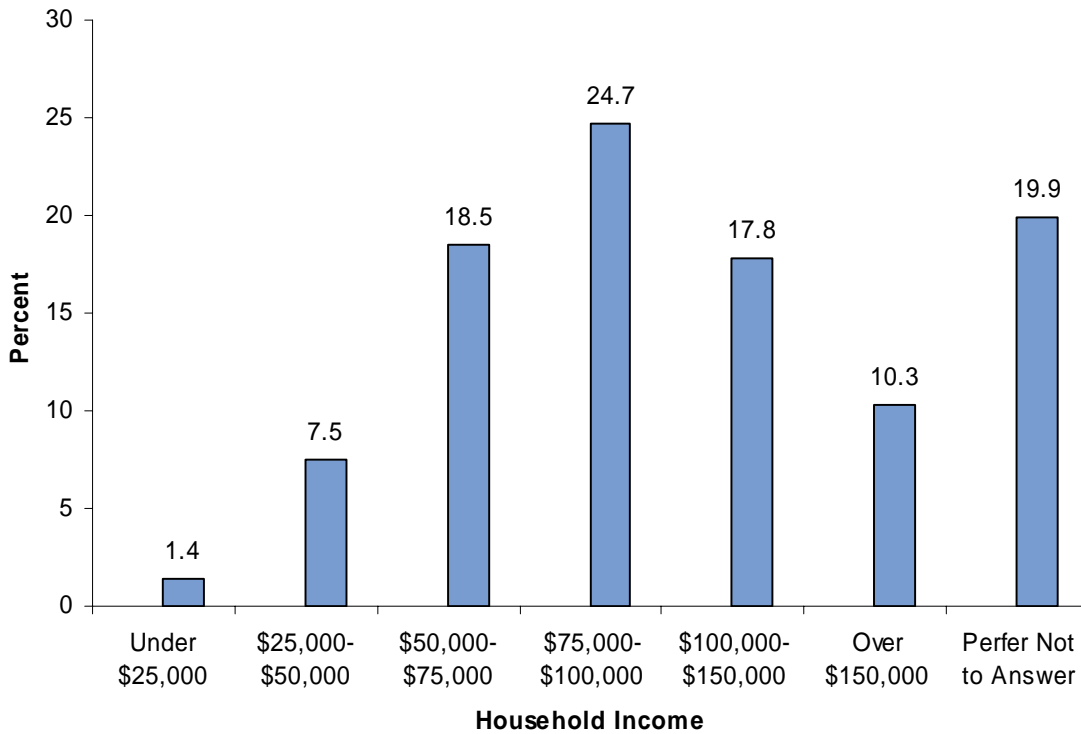
The participants were highly educated. The majority (81.2%) indicated that they had some university or graduate university or postgraduate university education (N=144).

**Figure 4: Participant's Education Level (N=144)**



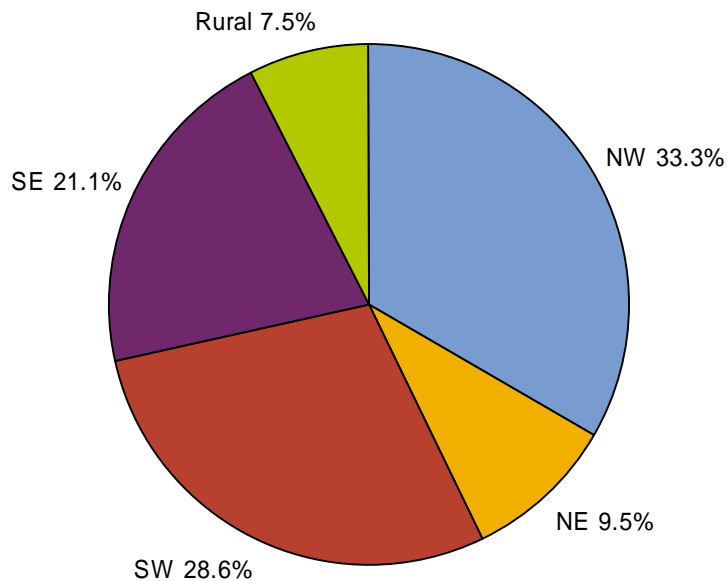
Using \$ 75,000 as a cut-of point (annual median household income in Calgary in 2005), the majority of the participants reported annual household income were \$75,000 and over (52.8%), 27.4% less than \$75,000 and 19.9% preferred not to answer the question (N=146).

**Figure 5: Participant's Household Income (N=146)**



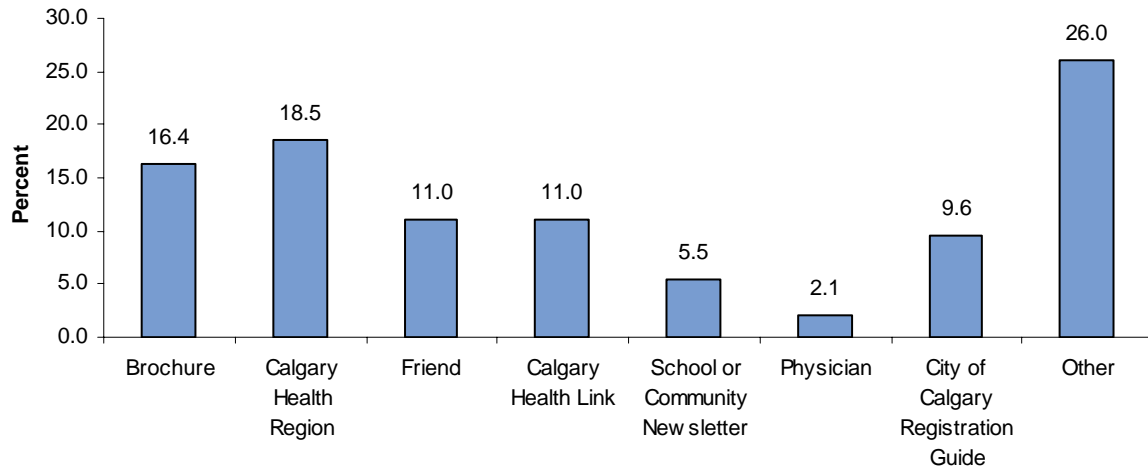
The majority of participants (61.9%) lived in the west of Calgary. 30.6 % of participants were from the East; in particular, only 9.5% were from the Northeast part of Calgary. 7.5% were from the Rural (N=147).

**Figure 6: Where Do You Live in Calgary (N=147)**



Respondents were asked about how they found out about the Picky Eating class. There was a wide range in response to this question and the majority (26.0%) of respondents indicated “Other” sources, followed by Calgary Health Region (18.5%), brochure (16.4%), Friends (11.0%) and Calgary Health Link (11.0%) (N=146). Major “Other” specified sources included Community Health Center (16), Mothers of Preschoolers program (8), Alberta Children’s Hospital (2).

**Figure 7. How Did You Find About This Class? (N=146)**



## Usability and Satisfaction

Participants were asked to give an overall rating of the entire class (1=not very helpful, 10=very helpful). The mean rating was 8.25 (N=134, Standard Deviation = 1.58).

Participants were asked to rate several statements about the class. Overall, the facilitator’s overall presentation, knowledge and organization were valued by the majority of the participants. The majority of the participants felt that the materials used in the class were informative and useful, the class location and time were good. The results are as follows.

**Table 1: Participants’ Ratings for Usability and Satisfaction of Picky Eating Class.**

Please indicate how much you agree with the following statements	N	Strongly Disagree n (%)	Disagree n (%)	Neutral N (%)	Agree n (%)	Strongly Agree N (%)
The educator spoke in a clear voice and was easy to understand.	150	0 (0.0)	1 (0.7)	5 (3.3)	34 (22.7)	110 (73.3)
The educator was knowledgeable about feeding relationships.	150	0 (0.0)	0 (0.0)	7 (4.7)	34 (22.7)	109 (72.7)
The educator allowed time for discussion and	150	0 (0.0)	0 (0.0)	4 (2.7)	23 (15.3)	123 (82.0)

Please indicate how much you agree with the following statements	N	Strongly Disagree n (%)	Disagree n (%)	Neutral N (%)	Agree n (%)	Strongly Agree N (%)
encouraged questions.						
The educator was able to answer my questions.	150	0 (0.0)	4 (2.7)	7 (4.7)	38 (25.3)	101 (67.3)
The educator seemed enthusiastic, interested and concerned.	150	0 (0.0)	0 (0.0)	9 (6.0)	21 (14.0)	120 (80.0)
The materials used in the class were informative and useful.	150	0 (0.0)	2 (1.3)	8 (5.3)	49 (32.7)	91 (60.7)
The class was held in a good location and easy to get to.	150	0 (0.0)	7 (4.7)	11 (7.3)	23 (15.3)	109 (72.7)
The class was held at a good time for me.	150	1 (0.7)	5 (3.3)	8 (5.3)	44 (29.3)	92 (61.3)
The presentation was too long.	147	67 (45.6)	34 (23.1)	22 (15.0)	11 (7.5)	13 (8.8)
The presentation was too short.	148	60 (40.5)	32 (21.6)	30 (20.3)	14 (9.5)	12 (8.1)

Participants were asked whether or not that the class be presented by a registered dietitian made a difference. 82.7% said “Yes”. Some reasons are shown in Table 2.

**Table 2: Qualitative responses to “Does it make a difference to you that this class was presented by a registered dietitian?”**

Category (Frequency)	Sample Comments
Knowledge (40)	<p>“Very knowledgeable about the field ”</p> <p>“More knowledgeable, better examples. “</p> <p>”Good knowledge of food requirements.”</p> <p>“ . . . knowledgeable about eating and nutrition.”</p>
Education, credibility, expertise (37)	<p>“...someone qualified to teach the class.”</p> <p>“Have a respect for education. They would more likely be up on current research generally.”</p> <p>“Can answer food questions - that’s her expertise.”</p> <p>“It’s easier to believe someone with an education.”</p>

Category (Frequency)	Sample Comments
Information (11)	<p>“More confident with information.”</p> <p>“More accurate information.”</p> <p>“I know his/her info is based on research.”</p>
Experience (10)	<p>“Added credibility to presentation, but more credibility was created by her having been through the struggles.”</p> <p>“Has practical experience...”</p> <p>“She could answer all my questions as she had experience.”</p>

Overall, 91.9% (N=148) of participants would recommend the Picky Eating Class to other parents/caregivers.

### Impacts of the Class

Participants significantly increased their level of knowledge associated with feeding relationships as a result of Picky Eating Class. All of the participants reported that they planned to use or increase their use of at least two practices recommended by the class.

### Knowledge Change

Participants were asked to indicate their knowledge level (1=low; 5=high) regarding some issues in Feeding Relationship. There was a significant increase ( $p < 0.001$ ) in parents’ knowledge levels in all five topic areas after taking the Picky Eating class. The results are shown as below.

**Table 3: Participants’ Level of Knowledge Before and After Attending the Class**

Topic Area	N	Mean Before Attending	Mean After Attending	Mean Difference	P
The “What” (Serving size & Food guide)	147	3.09	4.52	1.43	<0.001
The “When” (3 meals, 2-3 snacks, at regular times daily)	147	3.41	4.63	1.22	<0.001

Topic Area	N	Mean Before Attending	Mean After Attending	Mean Difference	P
The “Where” (as a family, at the table, with no TV)	146	3.88	4.71	0.83	<0.001
The “If” (Important not to force/bribe children to eat)	147	3.04	4.61	1.56	<0.001
The “How Much” (Important not to control amounts children eat)	147	2.95	4.63	1.68	<0.001

### Intentions to Change

Some recommendations regarding feeding relationship were provided in the Picky Eating class. Participants were asked whether or not they would like to adopt or increase their use of recommended practices.

#### *Statements related to practice*

The three practices reported to be most likely adopted or increase use by the participants are:

- I will provide my child with food every 2 to 3 hours. (Yes: 93.9%; Not sure: 4.8%, N=147)
- We will work at increasing the number of meals that we have together at the table as a family. (Yes: 93.7%; Not sure: 0.7%, N=142)
- I will avoid bribing my child to eat. (Yes: 89.7%; Not sure: 8.2%, N=146)

Other results regarding participants’ intentions to change are shown as follows.

**Table 4: Participants’ Intentions to Change Regarding the Recommended Practices**

Practices	N	Yes n (%)	No n (%)	Not Sure n (%)
I will provide my child with food every 2 to 3 hours.	147	138 (93.9)	2 (1.3)	7 (4.8)
We will work at increasing the number of meals that we have together at the table as a family.	142	133 (93.7)	8 (5.6)	1 (0.7)
I will avoid bribing my child to eat.	146	131 (89.7)	3 (2.1)	12 (8.2)

Practices	N	Yes n (%)	No n (%)	Not Sure n (%)
I will provide my child with 2 to 3 cups of milk per day	148	132 (89.2)	6 (4.1)	10 (6.8)
I will limit my child to 1 hour of screen time per day.	144	103 (71.5)	8 (5.6)	33 (22.9)
I will limit my child to a maximum of ½ cup of unsweetened juice per day.	145	125 (86.2)	5 (3.4)	15 (10.3)
If my child refuses to eat the foods offered at a given meal, I will avoid preparing him his favorite foods to ensure he eats something.	146	103 (70.5)	9 (6.2)	34 (23.3)

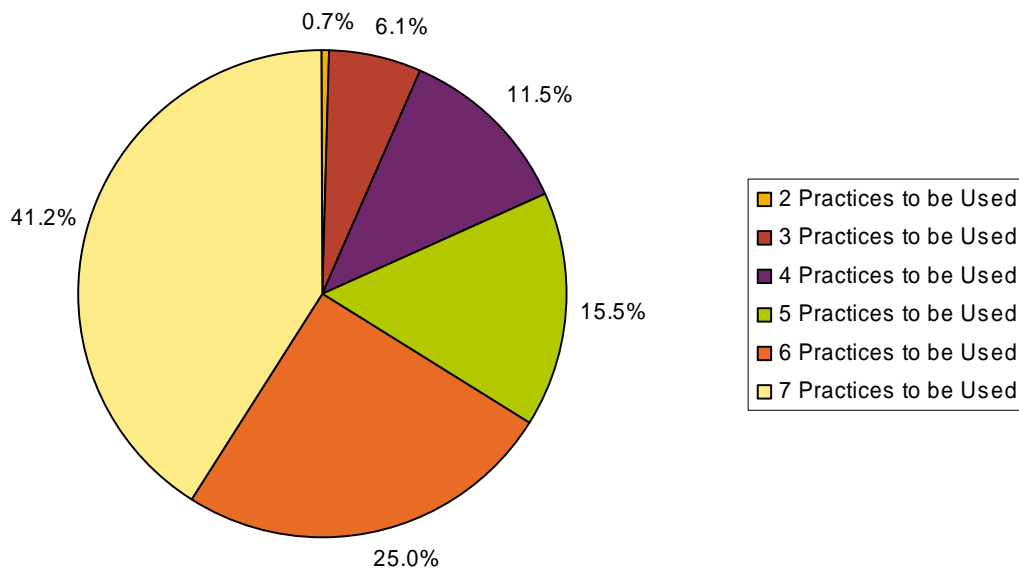
***Statements related to individuals***

All of the participants (N=148, 100%) in the Picky Eating Class reported that they plan to use or increase their use of at least two practices recommended by the Class.

Specifically:

- 41.2% reported they plan to use or increase their use of all seven practices;
- 25.0% reported they plan to use or increase their use of six practices;
- 15.5% reported they plan to use or increase their use of five practices;
- 11.5% reported they plan to use or increase their use of four practices;
- 6.1% reported they plan to use or increase their use of three practices; and,
- 0.7% reported they plan to use or increase their use of two practices.

**Figure 8: Likelihood of Participants to Adopt or Increase Use of Practices (N=148)**



57.4% (N=122) of the participants indicated that they would adopt some other practices as a result of the Picky Eating class. Those practices include add a vitamin supplement, increase daily activity, try tofu, etc.

### Comments on Class

The participants were asked to list three things that they liked the most about the class. The most frequent listed was the information offered by the class. This included information on portion sizes, information on feeding relationship, information on healthy food, and information on recipes, etc... In addition, the instructor and open discussion with the instructor and other participants were considered as one of the best things that the participants liked about the class. Sample comments are highlighted below.

**Table 5: What were the three things that you like the most about the class?**

Category (Frequency)	Sample Comments
Information <i>Handouts (16)</i>	“Handouts.” “Materials provided”

Category (Frequency)	Sample Comments
<p><i>Examples (15)</i></p> <p><i>Feeding relationship (14)</i></p> <p><i>Serving size/portion size (14)</i></p> <p><i>Strategies/ideas (9)</i></p> <p><i>Other information (90)</i></p>	<p>“Real life useful examples.”</p> <p>“Scenarios.”</p> <p>“Case study”</p> <p>“Knowledge on feeding relationship ”</p> <p>“Feeding relationship information. “</p> <p>”Feeding relationship.”</p> <p>“Portion sizes”</p> <p>“Loved the food serving size chart.”</p> <p>“Strategies for success”</p> <p>“Ideas to improve my child’s choices and nutrition.”</p> <p>“Realistic solutions.”</p> <p>“Informative”</p> <p>“The information I didn’t know about milk and juice.”</p> <p>“Went through different age stages.”</p> <p>“Promotes healthy choices/exercise/overall quality of life.”</p>
<p>Discussion/questions (56)</p>	<p>“Discussion with other parents.”</p> <p>“Encouragement of questions.”</p> <p>“Group discussion and questions.”</p>
<p>Instructor (39)</p>	<p>“Knowledgeable instructor.”</p> <p>“Speaker had strong presenting skills.”</p> <p>“The instructor was friendly and very knowledgeable.”</p>
<p>Feeling not alone (16)</p>	<p>“Affirmation that we are not alone.”</p> <p>“Nice to see other parents with similar issues.”</p> <p>“Knowing I’m not the only one with struggles.”</p>
<p>Atmosphere (9)</p>	<p>“Friendly atmosphere.”</p> <p>“Relaxed and casual”</p> <p>“Laid back atmosphere”</p>

When asked about what topics the participants would like to see included in the future class, 27.8% of respondents (N=36) indicated the recipes and cooking ideas. Other topics listed included list of high nutrition snacks, nutrition values, allergies, healthy school lunch, etc.

Forty-six participants provided the feedback regarding the improvement of the class. 45.7% thought that there was no need to improve (N=148). Other suggestions included longer time for each class, more comfortable classroom, microphone for instructor, recipes and cooking ideas, etc.

## **Results: Telephone Survey**

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### **Respondent Demographics**

Of 150 participants who finished the in-class survey, 143 participants left their contact information for future telephone follow-up survey, and 39 participated in the telephone survey, leading to a response rate of 27.3%.

The majority (94.7%, N=38) of participants were parents. 78.9% were mothers and 15.8% were fathers (N=36). The majority of participants indicated their age fell between the range of 30 to 34 years (36.8%), followed by 25 to 29 years (28.9%) and 40+ (18.4%) (N=38).

The majority of participants (62.2%) had one child in their household, followed by two children (21.6%). 5.4% had four children in their household (N=37). The mean age of all children was 30.53 months. Again, the majority of respondents reported being married (92.1%, N=38). Once more, participants were highly educated. The majority of participants (78.3%) who completed the follow-up survey had some university or graduate university or postgraduate university education. 10.8% had a technical school diploma and 8.1% had a high school diploma or less of an education (N=37).

Using \$ 75,000 as a cut-of point (annual median household income in Calgary in 2005), the majority of the participants reported annual household income were \$75,000 and over (44.7%), 36.9% less than \$75,000 and 18.4% preferred not to answer the question (N=38). The majority of participants (68.4%) lived in the west of Calgary. 29.0 % of participants were from the East, in particular, only 5.3% were from the Northeast part of Calgary. 2.6% were from the Rural (N=38).

Respondents were asked about how they found out about the Picky Eating class. There was a wide range in response to this question and 24.3% of respondents indicated “Other” sources, followed by Calgary Health Region (16.2%), brochure (13.5%), friends (13.5%) and school or community newsletter (13.5%) and Calgary Health Link (10.8%) (N=37). “Other” specified sources include Mothers of Preschoolers program (6) and Public Health Nurses (2).

## Usability and Satisfaction

Participants were asked to give an overall rating of the entire class (1=not very helpful, 10=very helpful). The mean rating was 7.26 (N=34, Standard Deviation= 2.22).

Among 39 respondents, 38 (97.4%) said that they would recommend / already recommended this class to other parents/caregivers.

## Impacts of the Class

Some recommendations regarding feeding relationship were provided in the Picky Eating class. Participants were asked whether or not they have tried recommended practices after they took the class, and if they haven't tried, how likely they were to try in the future.

## Behavior Change

### *Statements related to practices*

Three practices reported to have been more often tried by the participants were:

- Provide child with 2 to 3 cups of milk per day. (Yes: 91.9%, N=37)
- Provide child with food every 2 to 3 hours. (Yes: 91.9%, N=37)
- Don't bribe the child to eat. (Yes: 89.2%, N=37)

**Table 6: Participants' Behavior Change Regarding the Recommended Practices**

Practices	N	Yes n (%)	No n (%)
Provide child with 2 to 3 cups of milk per day.	37	34 (91.9)	3 (8.1)
Provide child with food every 2 to 3 hours.	37	34 (91.9)	3 (8.1)
Don't bribe the child to eat.	37	33 (89.2)	4 (10.8)
Limit child to 1 hour of screen time per day.	37	27 (73.0)	10 (27.0)
Limit child to a maximum of ½ cup of unsweetened juice per day.	37	28 (75.7)	9 (24.3)
If the child refuses to eat the foods offered at a given meal, avoid preparing him his favorite foods to ensure he eats something.	37	23 (62.2)	14 (37.8)

Practices	N	Yes n (%)	No n (%)
Increase the number of meals that the whole family sits together at the table.	37	29 (78.4)	8 (21.6)

For each practice, if the participants haven't tried it, they were asked how likely to try it in the future.

**Table 7: How Likely Are You to Try in the Future?**

Practices	N	Not Too Likely N (%)	Somewhat Likely n (%)	Moderately Likely n (%)	Very Likely n (%)
Provide child with 2 to 3 cups of milk per day.	3	1 (33.3)	1 (33.3)	0 (0.0)	1 (33.3)
Provide child with food every 2 to 3 hours.	3	1 (33.3)	1 (33.3)	1 (33.3)	0 (0.0)
Limit child to 1 hour of screen time per day.	10	3 (30.0)	2 (20.0)	3 (30.0)	2 (20.0)
Limit child to a maximum of ½ cup of unsweetened juice per day.	8	3 (37.5)	2 (25.0)	3 (37.5)	0 (0.0)
If the child refuses to eat the foods offered at a given meal, avoid preparing him his favorite foods to ensure he eats something.	14	4 (28.6)	5 (35.8)	2 (14.3)	3 (21.4)
Don't bribe the child to eat.	4	2 (50.0)	2 (50.0)	0 (0.0)	0 (0.0)
Increase the number of meals that the whole family sits together at the table.	8	1 (12.5)	3 (37.5)	3 (37.5)	1 (12.5)

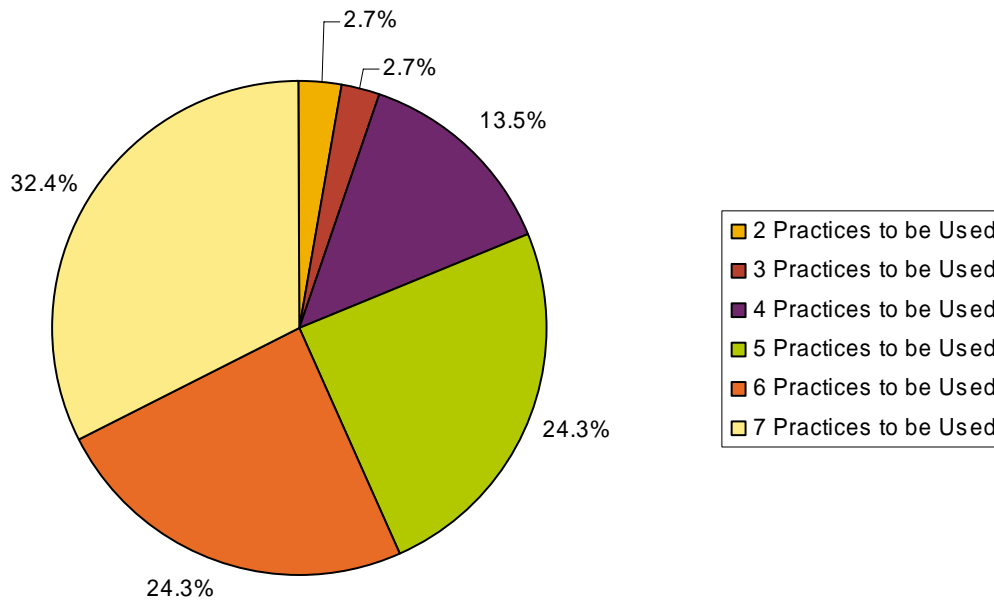
***Statements related to individuals***

All of the participants (N=37, 100%) reported that they had tried at least two practices recommended by the class during the past three months following the participation of the class. Specifically:

- 32.4% reported they have tried all seven practices;
- 24.3% reported they have tried six practices;
- 24.3% reported they have tried five practices;

- 13.5% reported they have tried four practices;
- 2.7% reported they have tried three practices; and,
- 2.7% reported they have tried two practices.

**Figure 9: Percentage of Participants Adopted or Increased Use of Practices (N=37)**



### ***Other Behavior change***

35.1% of the participants (N=37) have tried other ideas as a result of the Picky Eating class. The examples of ideas included sneaking certain foods into other foods, ensuring that environment is distraction free, trying not to pressure/make a battle, trying to offer more healthy snacks, etc...

### **Other Impacts**

73.7% of the participants (N=38) indicated that the variety of their child's diet had improved since they attended the class, and 73.7% (N=38) mentioned that mealtime was less stressful/more enjoyable now.

Participants were asked to list the single most important thing that they learned in the class.

**Table 8: What was the single most important thing that you learned in this class?**

Category (Frequency)	Sample Comments
The “If” - Important not to force/bribe children to eat (14)	<p>“Not giving them their favorite food if they won’t eat.”</p> <p>“Can’t force it.”</p> <p>“How not to give in to their demands....”</p>
The “What” – Serving size & food guide (11)	<p>“Increasing variety...”</p> <p>“OK if most servings come from fruit instead of vegetables. Can get protein from PB, eggs instead meat.”</p> <p>“Milk and juice quantities.”</p>
The “When” – 3 meals, 2-3 snacks, at regular times daily (5)	<p>“Feed them more often, more snacks; give milk less often.”</p> <p>“Just offer food every 2-3 hours.”</p>
The “How much” – Important not to control amounts children eat. (5)	<p>“Not to worry about child’s diet - won’t starve themselves to death.”</p> <p>“...healthy child won’t starve itself...”</p>
Feeling not alone (5)	<p>“Knowing there are lots of others in the same situation and with the same problem.”</p> <p>“Good to listen to other parents and know you’re not alone.”</p>
Feeding Relationships (2)	<p>“Rules/guidelines as to whose role is whose.”</p> <p>“Roles and responsibilities of parent vs. child.”</p>
The “Where” – as a family, at the table, with no TV (1)	<p>“Sit down to family meals and eat together.”</p>

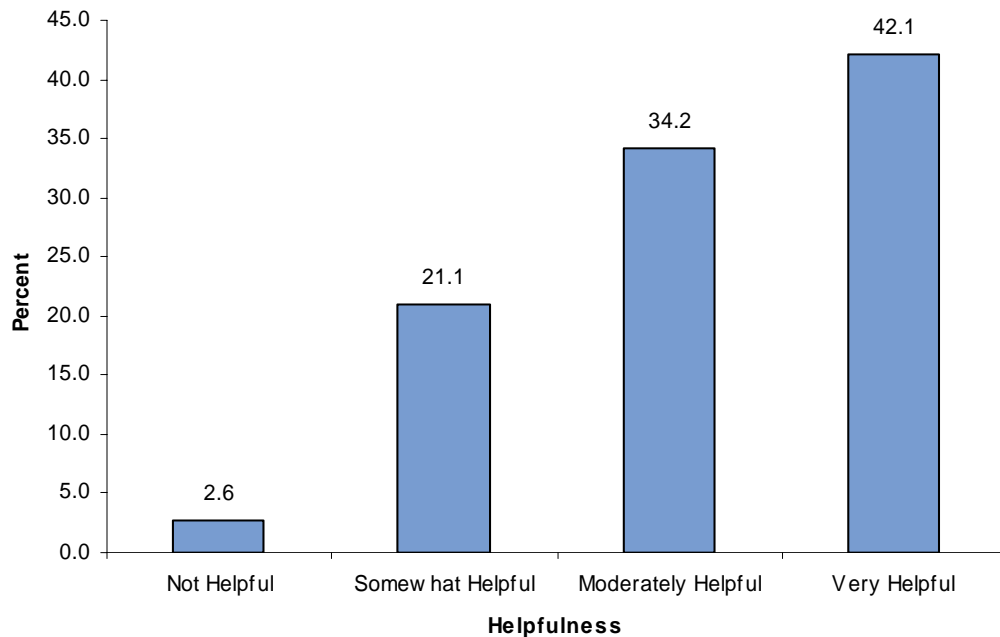
### **Feedback on Package of ‘Picky Eating’ Information**

In the class, participants were given a package of ‘Picky Eating’ information. The package includes the information sheets of:

- A: Healthy Eating and Active Living for Your 1-5 Years Old;
- B: Food Serving Sizes for Children 1 to 5 Years;
- C: The Feeding Relationship for Toddlers, Preschoolers and Children;
- D: Books and Websites on Healthy Eating, Active Living and Parenting.

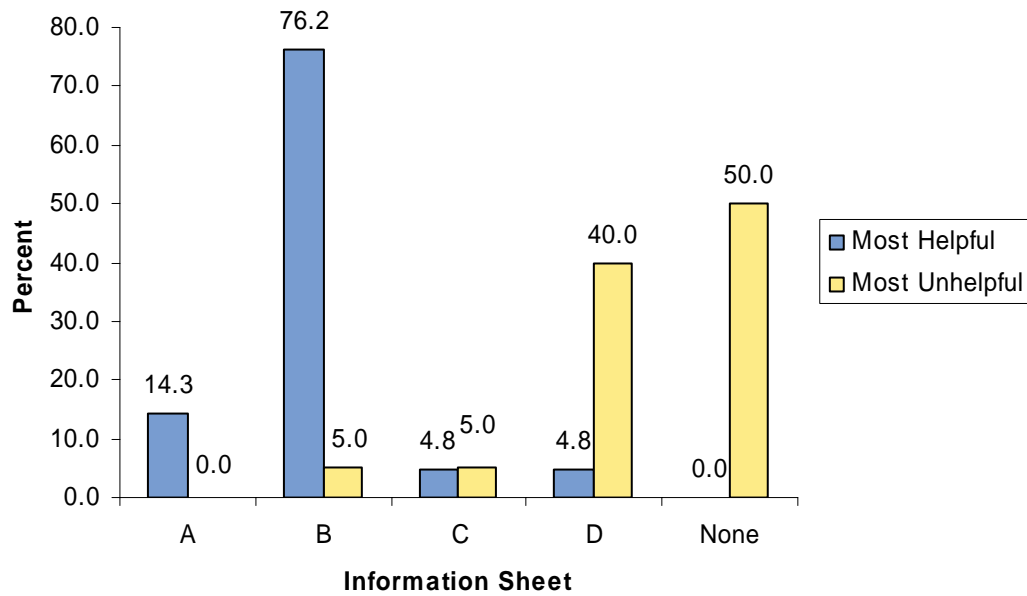
76.3% of the participants (N=38) thought that the package was moderately helpful or very helpful; 21.2% thought that the package was somewhat helpful and 2.3% thought that the package was not helpful.

**Figure 10: How Helpful Was the Entire Package? (N=38)**



76.2% (N=21) indicated that information sheet of “Food Serving Sizes for Children 1 to 5 Years” was most helpful in the package. When asked about which information sheet in the package was most unhelpful, 40% (N=20) indicated that the information sheet of “Books and Websites on Healthy Eating, Active Living and Parenting” was most unhelpful in the package. However, 50% (N=20) felt that none of the information was unhelpful.

**Figure 11: Which Information Sheet is Most Helpful/Unhelpful?**



## Comparison between In-Class Survey and Telephone Survey

In total, there are thirty-nine people who took both in-class survey and telephone follow-up survey.

### Demographic

Cross-tabulation test was conducted to examine the demographic difference between the sample in in-class survey and the sample in telephone survey. No statistical difference was noted.

**Table 9: Comparison of Demographics Between In-Class and Telephone Surveys**

		In-class survey % (freq)	Telephone survey % (freq)	Percent Difference
Parent or Caregiver		<b>N=147</b>	<b>N=38</b>	N/A
	Parent	95.2 (140)	94.7 (36)	0.5
	Caregiver	4.8 (7)	5.3 (2)	0.5
Gender		<b>N=145</b>	<b>N=37</b>	N/A
	Male	7.6 (11)	13.5 (5)	5.9
	Female	92.4 (134)	86.5 (32)	5.9
Number of Children in Household		<b>N=136</b>	<b>N=37</b>	N/A
	1	57.4 (78)	62.2 (23)	4.6
	2	34.6 (47)	21.6 (8)	13.0
	3	5.9 (8)	10.8 (4)	4.9
	4	2.2 (3)	5.4 (2)	3.2
Relationship to Child		<b>N=145</b>	<b>N=38</b>	N/A
	Mother	86.9 (126)	78.9 (30)	8.0
	Father	8.3 (12)	15.8 (6)	7.5
	Stepmother	0.7 (1)	0.0 (0)	0.7
	Stepmother	0.7 (1)	0.0 (0)	0.7

		In-class survey % (freq)	Telephone survey % (freq)	Percent Difference
	Other	3.4 (5)	5.3 (2)	1.9
<b>Age</b>		<b>N=148</b>	<b>N=38</b>	N/A
	20-24	2.0 (3)	2.6 (1)	0.6
	25-29	20.3 (30)	28.9 (11)	8.6
	30-34	43.9 (65)	36.8 (14)	7.1
	35-39	19.6 (29)	13.2 (5)	6.4
	40+	14.2 (21)	18.4 (7)	4.2
<b>Marital Status</b>		<b>N=148</b>	<b>N=38</b>	
	Married	87.8 (130)	92.1 (35)	4.3
	Common Law	8.1 (12)	0.0 (0)	8.1
	Single	2.0 (3)	2.6 (1)	0.6
	Divorced/separated	2.0 (3)	5.3 (2)	3.3
<b>Education Level</b>		<b>N=144</b>	<b>N=37</b>	N/A
	Less Than High School	1.4 (2)	3.7 (1)	2.3
	High School	8.3 (12)	8.1 (3)	0.2
	Technical School	9.0 (13)	10.8 (4)	1.6
	Some University or College	31.9 (46)	24.3 (9)	7.6
	University or College	41.0 (59)	45.9 (17)	4.8
	Postgraduate	8.3 (12)	8.1 (3)	0.2
<b>Household Income</b>		<b>N=146</b>	<b>N=38</b>	N/A
	Under \$25,000	1.4 (2)	0.0 (0)	1.4
	\$25,000 - \$50,000	7.5 (11)	5.3 (2)	2.2
	\$50,000 - \$75,000	18.5 (27)	31.6 (12)	12.1
	\$75,000 - \$100,000	24.7 (36)	26.3 (10)	1.6
	\$100,000 - \$150,000	17.8 (26)	15.8 (6)	2.0
	Over \$150,000	10.3 (15)	2.6 (1)	8.7
	No response	19.9 (29)	18.4 (7)	1.5

		In-class survey % (freq)	Telephone survey % (freq)	Percent Difference
Location		<b>N=147</b>	<b>N=38</b>	N/A
	Northwest	33.3 (49)	42.1 (16)	8.8
	Northeast	9.5 (14)	5.3 (2)	4.2
	Southwest	28.6 (42)	26.3 (10)	2.3
	Southeast	21.1 (31)	23.7 (9)	2.6
	Rural	7.5 (11)	2.6 (1)	4.9

## Usability

Participants were asked to give an overall rating of the entire class in both in-class and telephone follow-up surveys (1=not very helpful, 10=very helpful). The mean ratings were 8.56 (N=34, Standard Deviation= 1.05) and 7.27 (N=34, Standard Deviation=2.22) for the in-class survey and telephone survey, respectively. The result from paired t-test indicates that there was no statistical difference between these two ratings ( $p=0.83$ ).

## Impacts of the Class

Some recommendations regarding feeding relationships were provided in the Picky Eating class. Participants were asked whether or not they would like to adopt or increase their use of recommended practice in the in-class survey, and whether or not they have tried recommended practices in the telephone survey. The top three practices with more discrepancy between the participants' intentions to change and the changes they actually made were:

- If the child refuses to eat the foods offered at a given meal, avoid preparing him his favorite foods to ensure he eats something;
- We will work at increasing the number of meals that we have together at the table as a family; and
- Limit child to a maximum of ½ cup of unsweetened juice per day.

The results of comparison of participants' intentions and behavior changes are shown in the following table.

**Table 10: Participants' Intentions and Behavior Changes**

	Intentions N	Behavior change N (%)	No Change N (%)	No Response N (%)
Provide child with 2-3 cups of milk per day	37	33 (89.2)	2 (5.4)	2 (5.4)
Provide child with food every 2 to 3 hours	38	34 (89.5)	3 (7.9)	1 (2.6)
Limit child to 1 hour of screen time per day	27	23 (85.2)	4 (14.8)	0 (.0)
Limit child to a maximum of half cup of unsweetened juice per day	33	27 (81.8)	5 (15.2)	1 (3.0)
Avoid preparing child his favorite meal if refuses to eat meal that was prepared	29	19 (65.5)	9 (31.0)	1 (3.4)
Don't bribe the child to eat	34	28 (82.4)	4 (11.8)	2 (5.9)
Increase the number of meals that whole family sit together at the table	36	27 (75.0)	7 (19.4)	2 (5.6)

## Discussion

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Overall, the current evaluation produced very positive feedback regarding the Picky Eating Class. The results of this evaluation show that

- Participants significantly increased their level of knowledge associated with feeding relationships as a result of the Picky Eating Class that was taught by a registered dietitian;
- All the participants in the telephone survey experienced behavior change based on the concepts they learned from class;
- The majority of the participants in the telephone survey thought that the class handouts were helpful; and
- The facilitator's overall presentation, knowledge and organization were valued by majority of the participants.

### Knowledge Change

High-quality feeding interaction during the first years of life tends to be positively linked to the child's subsequent cognitive and linguistic competence (Barnard, Hammond, Booth, et al., 1989). The current evaluation suggests that there was a significant increase in participants' level of knowledge regarding feeding relationships as a result of Picky Eating Class. In particular, the highest increase is in the topic of "How Much" (important not to control amounts children eat). Johnson and Birch (1994) suggested that parents provide healthful food choices but allow children to assume control of how much they eat. Concern for their children's welfare, however, may influence parents to increase control when they believe their safety is at risk (Baumrind, 1978; Constanzo & Woody, 1985). Through the Picky Eating class, parents and caregivers recognized the importance of "How Much" and increased the knowledge regarding feeding relationships. This will assist building optimal environment for children's learning of eating skills and positive eating behaviors.

## **Intention to Change and Behaviour Change**

Intention is an important factor in determining behavior and behavioral change. The evaluation of intention to change as a result of Picky Eating class demonstrates that all of the participants reported that they planned to use or increase their use of at least two practices recommended by the class. In the follow-up telephone survey after three months following the class participation, all participants reported that they have tried at least two practices recommended by the class during the past three months after the Picky Eating class. This suggests that Picky Eating class has influenced not only the participants' intentions, but also their behaviors. However, it would be useful to evaluate the longer effect of the class, for example, to examine whether the class influences the participants' behavior after one-year following the class participation.

What people intend to do, and what people actually do often differs. The data from the participants who took both in-class and telephone surveys shows that there was discrepancy between the participants' intentions to change and the changes they actually made in real life. It would be interesting to find out what caused a participant's behavior to deviate from previous intentions. Some explanations discovered by previous research (DiBonaventura and Chapman, 2004, 2005) may also be applicable to our study include:

- Intention stability moderates the relationship between intention and behavior. In other words, people with more stable intentions tend to follow through more often with the intentions they do have. In our evaluation, the intentions that the participants had immediately after the Picky Eating class may be only temporary desires and could not exist over time. If so, more efforts are recommended to help participants build stronger intention–behavior agreement in feeding relationship practices. Some efforts may include sending the participants newsletters/phamplets to remind them of practices recommended by the class, making follow-up calls to provide more consultantations on performing the practices, etc.
- Unforeseen barriers can decrease the relationship between intention and behavior. Factors that emerge after the intention was made, not surprisingly, reduce the chance of performing the behavior. Additionally, underestimating the effect of barriers can also cause reduction in the relationship between intention and

behavior. Expecting the barriers to performing the behavior to be minor, yet finding them much more problematic reduces the chance of performing the behavior. A discussion of possible barriers with the participants in the Picky Eating class is recommended. This could help people be aware of the barriers and be prepared to overcome the barriers in the future.

## **Culture Issues**

It is important to consider that our sample primarily consisted of middle-class, highly educated parents. Lower income, less educated may have been under-represented in the current evaluation. In addition, even though the Picky Eating was offered in all quadrants of Calgary, there was poor attendance from the East. The majority of participants lived in the West part of Calgary. We know that the East has a large immigrant population. To reach diverse populations, including recent immigrants, those living on lower incomes and those who may not read or speak English frequently, the Calgary Health Region has designed an Adapted Picky Eating program. This program was adapted from the Picky Eating curriculum to have its messages and learning activities portrayed in a manner that supports the target populations. The Adapted Picky Eating program is facilitated through agencies serving the target populations, and has been pilot tested with six agencies including four servicing lower-income families and two serving culturally diverse families. The feedback from the pilot tests was positive and a number of requests for the class have since come in from other agencies. Currently, the Calgary Health Region provided the funding for twelve Adapted Picky Eating classes in 2007-2008. Funding to provide the class on a larger scale of four times per month has also been tentatively planned for 2008-2009.

To better serve diverse populations, we first need to discover and understand these populations' needs, opportunities and barriers. Presently, 3 Cheers for the Early Years has proposed to conduct a Parenting Needs Assessment to:

1. identify the information and delivery needs of parents/caregivers with children 0-6 in the CHR;
2. identify ways to increase the accessibility and cultural relevance of parenting programs to specific parent populations;

3. increase professional understanding of what parents' want /need in terms of supporting healthy parenting; and
4. to improve professional service delivery of appropriate parenting supports and services.

A parent population survey and four focus groups will be conducted. Specifically, focus groups will be conducted with aboriginals, immigrants, South East Calgary residents, and a quadrant of the city where the health and economic disparities are most pronounced. It is anticipated that the findings will provide the Healthy Child and Youth Advisory Committee of 3 Cheers for the Early Years with direction in the future planning and delivery of parenting supports and services that are responsive to the needs of parents in order to enhance their parenting capacity for healthy parenting practices, and ultimately enable children to reach their fullest developmental potential. The findings from the assessment may also help the Picky Eating program better understand diverse populations' needs and challenges as well as strategically improve current programs or plan other programs that are culturally relevant and meaningful for diverse populations.

### **Feedback on Information Sheet and Class Re: Serving Sizes**

With respect to the handouts from the Picky Eating class, the majority of participants indicated that they were all helpful and the information sheet of "Food Serving Sizes for Children 1 to 5 Years" was most helpful in the package. Also, we found that most participants considered "Serving sizes/portion sizes" as one of the best /important things they learned from the class in both in-class survey and telephone follow-up survey. Portion size may very well be implicated in the development of children becoming overweight. Lioret and his colleagues (2007) found that children overweight aged 3–6 years was positively correlated to portion sizes. They concluded that at very young ages, the increase in overweight may be driven in part by a shift in eating patterns towards larger portion size of energy-dense and nutrient-poor foods (Lioret, Volatier, Lafay, etc., 2007). Another study shows that parents can influence a child's weight through specific feeding and activity practices and perhaps more broadly through their parenting style and management of family functioning (Rhee, 2008). This addresses how important a role that parents play in the child's development of dietary

habits. The information of food serving sizes/portion sizes learned by the participants through Picky Eating class could be useful in their conducting interventions that reduce the risk of children becoming overweight or developing childhood obesity.

## **Suggestions for Improvement**

There was a wide range in participants' response to the questions about what they would like to see included in the future class and how the class could be improved. "Recipes and cooking ideas" was identified by many participants. Participants would like to get recipes and cooking ideas for their picky eaters, especially the recipe/ideas that could follow the "food serving sizes" chart.

3 Cheers now has a resource, Grab 'N Know Kit, which includes a Snacking Kit and a Family Meal Planning Kit. These are hands-on planning tools for healthy snacks & meals, designed for existing group programs, and for families with children ages 2-5 years. Integration of this resource into the Picky Eating Class is one strategy for meeting participant's need for recipes and cooking ideas.

## **Limitations**

Convenience sampling was used in this evaluation, based on those who attended the classes and filled out an evaluation form in class. This approach has an inherent volunteer bias, and may not represent the entire population. As indicated before, our sample is primarily consisted of middle-class, highly educated parents. Lower income, less educated may have been under-represented in the sample, or in the class. An evaluation with larger samples, using more powerful research designs, such as pre-post design, longitudinal design, comparison group design, etc., is recommended.

The response rate of follow-up telephone survey was low. The design of follow-up telephone survey was to elicit participants' behavioral changes as a result of the class. With low response rate, we must address how much of a problem the issue of non-response is. Do people who did not respond to the telephone follow-up survey significantly differ from those who did in terms of behavior changes? Though there was no statistical significant difference in demographics between the sample in in-class survey and the sample in telephone follow-up survey, we can not assume that the

behavior changes in the respondents in telephone follow-up survey would represent those of all attendees. Therefore, precaution needs to be taken when interpreting the findings.

Self-reported change in knowledge and behavior was employed in this evaluation. Though some research supports the validity of using self-reported response, this method opens the possibility that respondents could over or under estimate their changes.

## Recommendations

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The current evaluation suggests that Picky Eating class has a positive impact on participants, not only on their knowledge and intentions, but also on their behaviors. Continuation of this class is recommended. The information sheets are also recommended to continue to distribute to the participants. The following suggestions are based on the evaluation findings.

1. Analyze the long-term effects of the class. Further evaluation is suggested to examine the longer effects of the Picky Eating class with larger samples, using more powerful research designs.
2. Consider adding information of barriers in implementing the recommended practices in Picky Eating class. This will help participants to put their intentions into practices.
3. Provide more information about healthy recipes/cooking ideas. Promotion of Grab 'N Know Kits, a resource from Nutrition, is recommended.
4. Evaluate Adapted Picky Eating program. To examine whether the Adapted Picky Eating has met the needs from diverse populations, including lower income, less educated and recent immigrants, on the issue of picky eating, an evaluation of the program is recommended.
5. Analyze the findings from the Parenting Needs Assessment that will be conducted by 3 Cheers for the Early Years. The findings from the assessment may help the Picky Eating program better understand diverse populations' needs and challenges and strategically improve current program or plan other programs that are culturally relevant and meaningful for diverse populations.

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## **Appendix A: Cover Letter in In-Class Survey**

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Dear parent,

Congratulations on completing the Picky Eating class. To better meet parents' needs in learning ways to promote healthy eating habits and active living habits for their children, we would like to hear from you regarding the usefulness of this class.

***Who is conducting the evaluation?*** 3 Cheers for the Early Years is doing the study. 3 Cheers for the Early Years is a multi-faceted program of the Calgary health Region aimed at improving health outcomes for children pre-conception to age six.

***Do I have to participate?*** No. But we hope you will. Your answers will help us improve the class and services to parents like yourself.

***How long will this take?*** This questionnaire only takes about 5-10 minutes to complete.

***Who will see my answers?*** Only the evaluation staff will see your answers. Your answers will be strictly confidential.

***OK, what do I do?*** Fill in the questionnaire as honestly as you can. When you are finished, please place it in the envelope and seal it. The class instructor will collect the survey.

If you have any questions concerning the survey or evaluation project, please contact Jenny Zhang, Evaluation Specialist, at 403-955-2390.

***We truly appreciate your help! Thank you!***

Sincerely yours,

## Appendix B: In-Class Survey

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1. Please give an overall rating of the entire class in enhancing your knowledge in feeding relationship. (Circle answer, 1 being Not Very Helpful, 10 being Very Helpful.

Not Very Helpful    1    2    3    4    4    6    7    8    9    10    Very Helpful

2. On a scale of 1 to 5, with 1 being Strongly Disagree (SD) and 5 being Strongly Agree (SA), please indicate how much you agree with the following statements about the class.

Statements	SD				SA
a. The educator spoke in a clear voice and was easy to understand	1	2	3	4	5
b. The educator was knowledgeable about feeding relationships.	1	2	3	4	5
c. The educator allowed time for discussion and encouraged questions	1	2	3	4	5
d. The educator was able to answer my questions.	1	2	3	4	5
e. The educator seemed enthusiastic, interested and concerned.	1	2	3	4	5
f. The materials used in the class were informative and useful.	1	2	3	4	5
g. The class was held in a good location and easy to get to.	1	2	3	4	5
h. The class was held at a good time for me.	1	2	3	4	5
i. The presentation was too long.	1	2	3	4	5
j. The presentation was too short.	1	2	3	4	5

3. Does it make a difference to you that the class was presented by a registered dietitian?

Yes                       No

Please explain: \_\_\_\_\_

4. Please think back to your knowledge before attending this class and what it is now at the end of this class. For each topic listed below,

- 1) In the **LEFT** column, circle the number that you think best reflects your level of knowledge **AFTER** attending the class.
- 2) In the **RIGHT** column, circle the number that you think best reflects your level of knowledge **BEFORE** attending the class.

Knowledge Level AFTER the Class					Knowledge Level PRIOR TO the Class						
LOW				HIGH				LOW			HIGH
<i>Principals of the "Feeding Relationship" for parents:</i>											
1	2	3	4	5	The "What" (Serving size & Food Guide)	1	2	3	4	5	
1	2	3	4	5	The "When" (3 meals, 2-3 snacks, at regular times daily)	1	2	3	4	5	
1	2	3	4	5	The "Where" (as a family, at the table, with no TV)	1	2	3	4	5	
<i>Principals of the "Feeding Relationship" for toddlers and children:</i>											
1	2	3	4	5	The "If" (Important not to force/bribe children to eat)	1	2	3	4	5	
1	2	3	4	5	The "How Much" (Important not to control amounts Children eat)	1	2	3	4	5	

5. As a result of this program, do you feel that you will adopt or increase your use of the following practices? (CHECK THE APPROPRIATE RESPONSE FOR EACH PRACTICE)

Practices	Yes	No	Not Sure
I will provide my child with 2 to 3 cups of milk per day			
I will provide my child with food every 2 to 3 hours.			
I will limit my child to 1 hour of screen time per day.			
I will limit my child to a maximum of ½ cup of unsweetened juice per day.			
If my child refuses to eat the foods offered at a given meal, I will avoid preparing him his favourite foods to ensure he eats something.			
I will avoid bribing my child to eat.			
We will work at increasing the number of meals that we have together at the table as a family.			

Are there other practices that you will adopt as a result of this program?

Yes       No

If YES, please specify: \_\_\_\_\_

6. What were the three things that you like the most about the class?

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

7. What topics would you like to see included in the future class?

8. Is there any way in which you feel class could be improved?

9. Would you recommend this class to other parents/caregivers?

Yes       No       Not Sure

Please explain: \_\_\_\_\_

10. How did you find about this class? (Please check all that apply)

- Brochure
- Calgary Health Region Website
- Friend
- Calgary Health Link
- School/community newsletter
- Physician
- City of Calgary registration guide
- Other (Please specify) \_\_\_\_\_

11. Did you take the Picky Eating Class as a parent \_\_\_\_\_ or a caregiver \_\_\_\_\_?

If you are a parent, please answer the following questions. Those questions will help us understand your background. If you are uncomfortable with any of these questions, you can choose not to answer. Thank you for your cooperation.

12. Are you:  Male       Female

13. Please indicate the ages of all the children living in your household:

Child 1: \_\_\_\_\_ Child 2: \_\_\_\_\_ Child 3: \_\_\_\_\_ Child 4: \_\_\_\_\_

14. What is your relationship to these children?

- Mother       Father       Stepmother       Stepfather  
 Other (Please specify) \_\_\_\_\_

15. What is your age?

- <20       20 – 24       25 – 29       30 – 34  
 35 – 39       40+       I prefer not to answer

16. Are you currently:

- Married       Common Law/Living with Partner       Single  
 Divorced/Separated  
 Widowed       I prefer not to answer

17. What is the last grade of school that you completed?

- Less than high school graduate  
 High school graduate  
 Technical school / vocational school  
 Some university or college graduate  
 University graduate  
 Postgraduate  
 I prefer not to answer

18. What was your approximate TOTAL household income, before taxes, last year? That would be the household income before taxes from all persons in your household.

- Under \$25,000  
 \$25,000 to \$50,000  
 \$50,000 to \$75,000  
 \$75,000 to \$100,000  
 \$100,000 to \$150,000  
 Over \$150,000  
 I prefer not to answer

19. Which part of the city do you live in?

- Northwest       Northeast       Southwest       Southeast       Rural

As a part of this evaluation, a follow-up telephone survey, which will take you about 5 minutes, will be conducted in <month> 2007. Could you please leave your contact information?

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

What is good time to contact with you? Morning\_\_\_\_, Noon\_\_\_\_,  
Afternoon\_\_\_\_, Evening\_\_\_\_\_.

**THANK YOU FOR TAKING THE TIME TO HELP US WITH THIS SURVEY!**

## Appendix C: Telephone Survey

Hello, this is \_\_ (name) with Calgary Health Region. May I talk to \_\_\_\_ (name). I'm calling as a follow-up to our Picky Eating Class training that you attended in March/May/June. We are following up to help us improve our class. Your participation is voluntary and the data will be recorded anonymously. You can call (955-2390) if you would like verification that we are conducting this follow-up. You may choose not to answer any question. Would you be willing to spend 5 minutes of your time responding to eight questions?

**IF No** Thank you for your time.

**IF Yes** Thank you.....I want to assure you that all information provided will be confidential and the class Evaluator will be happy to provide you with a copy of the results if you are interested.

1. How helpful was the Picky Eating Class in enhancing your knowledge in feeding relationship?  
 Not Very 1 2 3 4 4 6 7 8 9 10 Very Helpful

2. In the Picky Eating Class, there are some recommendations regarding feeding relationship. I am going to read a few of them, and as I do that, I would like you to tell me if you have had a chance to try it.

Recommendations	Did you try it?		How likely are you to try this suggestion in the future?			
	Yes	No, not yet ⇔	Not too likely	Somewhat likely	Moderately likely	Very likely
Provide child with 2 to 3 cups of milk per day	Yes	No, not yet ⇔	Not too likely	Somewhat likely	Moderately likely	Very likely
Provide child with food every 2 to 3 hours.	Yes	No, not yet ⇔	Not too likely	Somewhat likely	Moderately likely	Very likely
Limit child to 1 hour of screen time per day.	Yes	No, not yet ⇔	Not too likely	Somewhat likely	Moderately likely	Very likely
Limit Child to a maximum of ½ cup of unsweetened juice per day.	Yes	No, not yet ⇔	Not too likely	Somewhat likely	Moderately likely	Very likely
If the child refuses to eat the foods offered at a given meal, avoid preparing him his favourite foods to ensure he eats something.	Yes	No, not yet ⇔	Not too likely	Somewhat likely	Moderately likely	Very likely
Don't bribe the child to eat.	Yes	No, not yet ⇔	Not too likely	Somewhat likely	Moderately likely	Very likely
Increase the number of meals that the whole family sit together at the table	Yes	No, not yet ⇔	Not too likely	Somewhat likely	Moderately likely	Very likely

3. Are there any other ideas you tried in as a result of the class?

No ----- > GO TO NEXT QUESTION

Yes----- > IF YES, CAN YOU PROVIDE SOME EXAMPLES?

Examples: \_\_\_\_\_

4. Has the Variety in your child's diet improved since you attended the Picky Eating class?  
 Yes  No

5. Is meal time less stressful/ more enjoyable since you attended the Picky Eating class?  
 Yes  No

4. What was the single most important thing that you learned in this class?

5. Would you recommend this class to other parents/caregivers? Or did you recommend this class to other parents/caregivers?

Yes  No

6. In the class, you were given a package of 'Picky Eating' information. The package includes the following resources:-

- A. Healthy Eating and Active Living For Your 1-5 year old
- B. Food Serving Sizes for Children 1 to 5 Years
- C. The Feeding Relationship for Toddlers, Preschoolers and Children
- D. Books and Websites on Healthy Eating, Active Living, and Parenting

How useful/helpful was the entire package?

- Not helpful
- Somewhat helpful
- Moderately helpful
- Very helpful

7. Which information sheet in the package is most helpful?

8. Which information sheet in the package is most unhelpful?

Thank you for your time and participation in this survey. If you would like a copy of the Survey results, please contact Jenny Zhang, Evaluator of the class at 955-2390.

Interviewee's name: \_\_\_\_\_ Phone number: \_\_\_\_\_