

Methods to Collect Dietary Intake in Young Children



General considerations for dietary assessment of young children



- Must use a proxy reporter—sometimes >1+
 - Often eat only one meal consistently with family, especially during week



- Literacy
 - General
 - Food
 - Health
 - Technology



- Accessibility
- Language (particularly clinically)



Costs



What is the question of interest?



- Is diet the primary aim? What is the investment in diet/nutrition outcomes?
- Total intake (weekend vs. weekday variability)
- Intake in specific settings
 - home, childcare, restaurant, etc.
- Specific nutrients, energy intakes, diet quality
 - Nutrients from foods and/or supplements (food-derived or synthetic)
- Eating behavior
 - neophobia, dietary variety, selective eating
- The environmental and social contexts of eating/feeding
 - Foods eaten away from home vs. foods prepared/eaten at home
 - Family meals





When is good, good enough?

- Dietary patterns
- Groups vs. individuals
- Concordance among individuals
- What level of specificity is needed to answer the question?
 - Child
 - Family/childcare
 - Community
 - Geographic
- What needs to be measured?
 - nutrients, foods, supplements, environment



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Instrument Profiles

Introduction

24-hour Dietary Recall

Food Record

Food Frequency Ouestionnaire

Screeners

Comparing Dietary Assessment Instruments

Key Concepts

Choosing An Approach: Recommendations

Learn More

Glossary

References & Resources

Dietary Assessment Instrument Profiles

Various types of self-report instruments have been developed to assess dietary intake. Each has distinct features as well as strengths and limitations.

This section describes the major types of instruments that rely on individuals reporting their own diets, with information on their salient features; uses and limitations; validation issues; and data capture, processing, and analysis considerations:

- 24-hour Dietary Recall Profile
- Food Record Profile
- Food Frequency Questionnaire Profile
- Screeners Profile

<u>Diet History</u> and <u>Observation</u> also are sometimes used to assess dietary intake, but they are not considered in detail in the Primer.

This section also provides an "at-a-glance" table that compares key features of the main self-report dietary assessment instruments:

• Comparing Dietary Assessment Instruments

The Profiles in this section of the Primer contain numerous links to other sections, including other Profiles, <u>Key Concepts</u>, <u>Choosing an Approach for Dietary Assessment</u>, <u>Learn More</u>, and the <u>Glossary</u>. Links with <u>dashed underlines</u> will show you terms from the Glossary. Links with <u>solid underlines</u> will take you to other sections of the Primer.

Traditional methods of dietary assessment

24-hour recall

ASA24 (automated)

Pros

- Interviewer assisted
- Eng/Sp/other
- Access is free

Questions answered

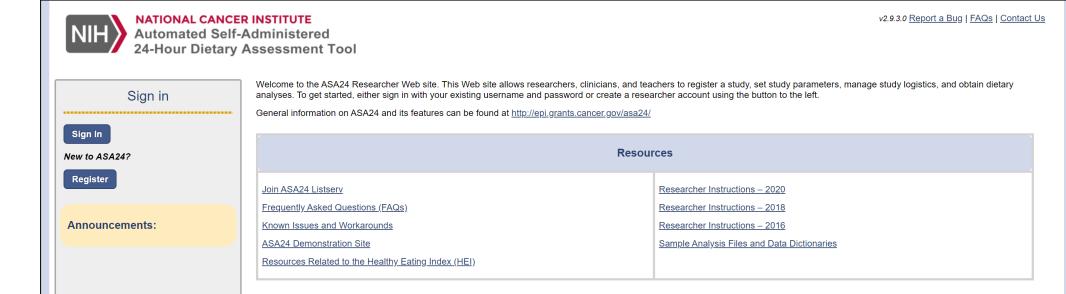
- Nutrients
- Foods
- Dietary patterns
- Supplements

Drawbacks

- Recall bias
- Multiple caregivers
 Which meals
- Staffing costs

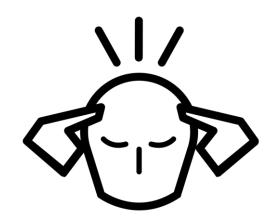
Considerations

- Large cohorts
- Which meals various caregivers eat w/ child?
- Can be combined w/ other methods



Parents' ASA24 experiences

- ✓ Time commitment, but only 1x/day.
- ✓ Structure and repetition makes it easier
- X You can't recall something that you never knew
- X "Guesstimation" (portions, away from home)
- X Childcare changes to the proposed menu
- X Ethnic foods and restaurant items in database



Bekelman TA, Martin CK, Johnson SL, Glueck DH, Sauder KA, Harrall KK, Steinberg RI, Hsia D, Dabelea D on behalf of program collaborators for ECHO. Under review: *British Journal of Nutrition*.

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 Can be combined w/ other methods

Food diaries

- With or w/out technology
- Does not depend on memory
- Same as above
- Needs cues for supplements
- Same as above
- Can be higher subject burden
- Special populations
- EMA
- Photo assist?

The SEED experience— Why we chose food diaries



- Highly motivated group of caretakers with an interest in diet
- QC protocol including some EMA (reminder & follow up calls)
- QC protocol for data entry

- Usable records for n=1120 (70% response rate)
- 9% eliminated for lack of >1 day or plausibility

DiGuiseppi et al. (2016). Demographic profile of families and children in the Study to Explore Early Development (SEED): Case-control study of autism spectrum disorder. *Disability & Health J.* 9: 544-551.



Pros	Questions answered	Drawbacks	Considerations
 With or w/out technology Less subject burden Demands re: food & health literacy 	NutrientsFoodsDietary patterns	 Recall bias Cognitive load Less accuracy for individual intakes 	 Large cohorts Can be combined w/ other methods
Same as aboveTailored to intervention	Specific nutrientsSpecific foods	 Limited info on diet quality 	Same as above

Other methods

Time eaten

Food Photography

	Pros	Questions answered		Drawbacks		Considerations	
•	Photos rather than estimation of portions Different subject burden Food, tech & health literacy	 Nutrients Foods Dietary patterns Amounts offered and eaten Social context 	•		•	Sample size Meals or days EMA Can be used in conjunction w/ other methods	



<u>Objective</u>: Develop a **technology-based, interactive family intervention** to promote healthy lifestyles (and weight outcomes) for young children in both Head Start and family settings.

Bellows et al. (2018). HEROs: Design of a mixed-methods formative research phase for an ecocultural intervention to promote healthy eating and activity behaviors in rural families with preschoolers. *J Nutr Educ Behav*. 50: 736-745.



- Nutrient intake and dietary quality
- Concordance parent/child meal timing & foods served
- Level of cooking/preparation
- Additional context of family mealtime





McCloskey et al. 2019. Beyond nutrient intake: use of digital food photography methodology to examine family dinnertime. J Nutr Educ Behav. 51 (5), 547-555.

What do you see?

Reality: Portion Sizes





Mother Child Mother Child

Bekelman, Assessing dinner meals offered at home among preschoolers from low-income families with the Remote Food Photography Method. *Pediatric Obesity.* 14 (11), e12558

Other methods

Photography

•	Photos rather than estimation of
	estimation of
	portions
•	Different subject
	burden
•	Food, tech &
	health literacy

Pros

Questions answered

- **Nutrients** Foods
- Dietary patterns
- Amounts offered and eaten
- Social context

- Missed eating occasions
- Snacking
- All or nothing
- Internet availability

Drawbacks

- Expensive
- Social desirability

- **Considerations**
- Sample size Meals or days
- **EMA**
- Can be used in conjunction w/ other methods

Observation

Same as above

Time eaten

- Tailored to intervention
- Real time or recorded
- Tightly controlled
- Less implausibility

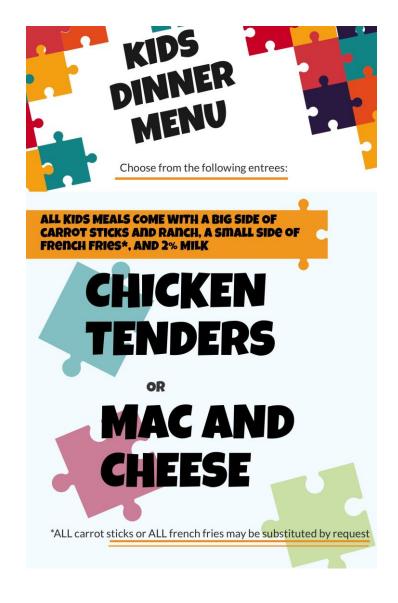
- Same as above
- Social desirability
- Staff training
- Expense

- Same as above
- Laboratory or in situ



Direct observation—single meal

- Eating environment—restaurant setting
- Choice architecture—children's menus
- Outcomes
 - Ordering behavior
 - Intake at that meal





Concluding thoughts

- Match assessment to research questions of study population & outcomes
- What is the goal?
 - General adequacy & patterns
 - Specific foods, nutrients, quantities
 - Preparation techniques
- Consider study design, timeframe, & budget
- QC is key
- Is there an opportunity for innovation?

There is no perfect method...what is best for the time & \$?

