

RESEARCH ARTICLE

Parental Feeding Style of Mothers in the Province of Ilocos Sur

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Abstract

The increasing trend of childhood obesity is becoming an imminent concern in both developed and developing countries. Besides genetic predisposition, environmental and social factors are contributory factors to this global epidemic. These factors include maternal feeding practices and style. This study determined mothers' parental feeding styles in the province of Ilocos Sur and the factors that predict them. Also, the study ascertained if parental feeding styles are related to the child's Body Mass Index (BMI).

This study used the descriptive-correlational research method and included 156 mothers with children aged 2-3. Respondents were chosen purposively. The Parental Feeding Style Questionnaire developed by Wardle et al. (2002) was used to gather the needed data. For data analysis, the frequency and percentage, mean, multiple regression, and Pearson product-moment of correlation were used.

This study concluded that mothers vary in their characteristics and so on their feeding styles. Based on study results, they have high levels of encouragement and emotional feeding and average levels of instrumental feeding and control over feeding. However, encouragement feeding is the dominant feeding style among respondents among the four feeding styles. Various maternal traits have been found to predict a specific parental feeding style except for the control over feeding subscale. Additionally, only encouragement feeding was found to have an indirect correlation with a child's BMI.

Keywords: *feeding practices; maternal factors; nutritional status*

Introduction

Children's growth and development dramatically depend on parent-child interactions, one of which is the feeding patterns and practices that affect their nutrition. At present, childhood malnutrition is a pervasive problem both in developed and developing nations. Its rapid increase was associated with various genetic and environmental factors. One of the environmental influences is parental control over a child's eating.

In the Philippines, malnutrition, in all its forms, is a perennial problem. Between undernutrition and overnutrition, the former is increasingly alarming. Tomacruz (2018) cited the United Nations Children's Fund's (UNICEF) Situational Analysis of Children in the Philippines, showing that for children under five years old, one in three was stunted while one in five was

underweight. She reiterated the claim of UNICEF representative to the Philippines Lotta Sylwander that the "very high" levels of child malnutrition were similar to those seen in many African countries, which were "substantially poorer." Particularizing the province of Ilocos Sur, the 2018 data of the Provincial Health Office specified that 261 are severely underweight and 1,277 are underweight out of the 44,635 children weighed from ages five (5) years and below.

Junio (2018) cited UNICEF Philippines nutrition specialist Joris Van Hees saying that good nutrition starts with the mother. Therefore, it is significant for their caregivers, mothers most of the time, to set normative behaviors in acceptable nutritional practices to prevent malnutrition. Costa, et al. (2018) claim that it is the mother who decides matters relevant to child feeding;

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hence, practices adopted by the mother may affect her child's eating behavior.

Parental feeding styles, according to Castle (2019), summarize the general attitudes and philosophies a parent has about feeding their child. It is a sub-category of parenting style, specifically during mealtimes that necessitates the same amount of responsiveness and demandingness as parenting style (Shloim, Edelson, Martin, & Hetherington, 2015). Moreover, Lipowska and colleagues (2018) denote that feeding style is the attitude of parents towards nutrition which affects the development of a child's eating behaviors. These parental attitudes toward nutrition are translated during parent-child interaction during mealtimes.

The literature evaluated various aspects of feeding styles, including emotional feeding, instrumental feeding (using food as a reward), prompting/encouragement to eat, and control over eating. Although its application is well-intended, these feeding styles can lead to desirable and also undesirable effects. Many studies have investigated the association between parental feeding style and a child's health (Rodgers et al., 2013; Barden et al., 2014; Raaijmakers et al., 2014; Inhulsen et al., 2017). However, these investigations have led to varied results. Based on these studies, it is certain that parents greatly influence the child's eating behavior and weight vis-à-vis their feeding styles. In the Philippines, especially in the Ilocos province, where malnutrition is also a problem, there is sparse data on maternal parental feeding styles like in many parts of the country. The absence of empirical data in the province or the country on this aspect can lead to an unfounded assumption that parental feeding styles are factors to consider in a child's nutrition in the local context and neglect this factor in the creation of strategies in solving issues of malnutrition. It is then essential to dig into the topic to augment the limited data in the literature on mothers' parental feeding styles in the province, if not in the country. Having the data on mothers' parental feeding styles is crucial in bringing to the fore the eminence of this aspect as a factor affecting a child's health and nutrition.

This study determined the mother's parental feeding style in the province of Ilocos Sur. Specifically, the study aimed to (1) identify the profile of the respondents; (2) determine the parental feeding style of the respondents; (3) determine the BMI of the respondents' child; (4) ascertain the factors that predict the respondents' parental feeding style, and (5) determine the significant relationship between the parental feeding style and child's BMI.

The study results could serve as an eye-opener to the respondents if they are unaware of their feeding style. To the health sector, data from this study could serve as a basis for crafting strategies to emphasize the importance of parental control over the child's health and nutrition. When appropriate strategies are in place, it is eventual that everyone is doing their share in improving the child's nutritional outcomes.

Methodology

Research Design. This study used a descriptive-correlational research design.

Sample and Setting. The study involved the mothers of toddlers ages 2 to 3 years in the province residing in a city and an upland municipality as the locale. Respondents were selected through purposive sampling. Exclusion criteria included: a) mother with a special child, and b) mother of a child with comorbidity/ies. Out of the forms distributed from July to September 2020, only 156 were returned.

Study Measure. The study used a two-part questionnaire-checklist. Part I elicited information on the profile of the respondents. Part II gathered data using the Parental Feeding Style Questionnaire (PFSQ) developed by Wardle, Sanderson, Guthrie, Rapoport, and Plomin (2002). The PFSQ was designed to assess different aspects of a maternal feeding 'style. This self-report measure consisted of 27 items on a 5-point Likert scale (a higher score indicated more frequent enactment of the specific construct). It measured four facets of feeding style: (1) emotional feeding (5 items), (2) instrumental feeding (4 items), (3) control over eating (10 items), and (4) prompting and encouragement to eat (8 items). The scores on each scale were averaged, where higher scores indicate a greater tendency for parents to use a particular feeding style.

The PFSQ obtained good internal and test-retest reliability (Wardle et al., 2002). Likewise, each subscale showed good internal consistency in this study (Cronbach's alphas: instrumental feeding: $\alpha=0.807$; control over eating: $\alpha=0.769$; emotional feeding: $\alpha=0.851$; prompting and encouragement to eat: $\alpha=0.873$).

Data Collection Method. Before data collection, the study protocol was subjected to Ethics Review by the UNP Ethics Review Committee and was consequently approved with ERC Approval No. 466. After approval, the researchers and their research assistants personally distributed the questionnaire with Iloko translation to the respondents, enclosed with a cover

letter explaining, in brief, the purpose of the study. Proper health protocols were ascertained during the entire phase of data gathering. Codes were used to make sure of the respondents' anonymity/confidentiality. Responses were tallied and subjected to statistical computation for analysis and interpretation.

Data Analysis. Collected data were processed using IBM's Statistical Package for Social Sciences version 26. The data sets were analyzed using frequency and percentage, mean, multiple regression, and simple linear correlation analysis.

Table 1. Socio-Demographic Profile of the Respondents

	<i>f</i>	Percentage
Age		
18-25 yrs	32	20.5
26-33 yrs	49	31.4
34-41 yrs	64	41.0
42-49 yrs	11	7.1
Total	156	100.0
Civil Status		
Single	32	20.5
Married	119	76.3
Widow	4	2.6
Separated	1	.6
Total	156	100.0
Educational Attainment		
Elementary level	4	2.6
Elementary graduate	5	3.2
High school level	27	17.3
High School graduate	27	17.3
College level	36	23.1
College graduate	55	35.3
Post graduate studies	2	1.3
Total	156	100.0
Occupation		
Non-skilled	85	54.5
Skilled	32	20.5
Professional	39	25.0
Total	156	100.0
Mother's BMI		
Underweight	9	5.8
Normal	108	69.2
Overweight	30	19.2
Obesity I	7	4.5
Extreme Obesity	2	1.3
Total	156	100.0

Results

Profile of the Respondents

A great majority of the respondents are married (76.3%), residing in an upland municipality (55.7%), and living with their partners/husbands (84%). Moreover, most of them are unskilled workers (54.5%), have a normal body mass index (BMI) (69.2%), and live in a nuclear family structure (60.3%). Furthermore, a significant percentage of the respondents are 34 to 41 years (41%), are college graduates (35.3%), have a family monthly income of 5,000.01 - 7,000.00 pesos (24.4%), have one to two pregnancies (28.2%), and have two living children (35.9%).

Family Monthly Income		
1,000.00 and below	13	8.3
1,000.01 - 3,000.00	14	9.0
3,000.01 - 5,000.00	33	21.2
5,000.01 - 7,000.00	38	24.4
7,001.01 - 10,000.00	25	16.0
10,000.01 and above	32	20.5
Missing Response	1	.6
Total	156	100.0
Place of Residence		
City	69	44.23
Upland	87	55.77
Total	156	100.0
Living arrangement		
Living with Partner/husband	131	84.0
Not living with partner/husband	25	16.0
Total	156	100.0
Family Structure		
Nuclear	94	60.3
Extended	62	39.7
Total	156	100.0
Number of Pregnancy		
1	44	28.2
2	44	28.2
3	42	26.9
4	20	12.8
5	3	1.9
6	2	1.3
8	1	.6
Total	156	100.0
Number of Living Children		
1	51	32.7
2	56	35.9
3	34	21.8
4	10	6.4
5	3	1.9
6	1	.6
8	1	.6
Total	156	100.0

The Parental Feeding Style of The Respondents

Based on the respondents' mean scores on Table 2, they reported "High" levels of Encouragement Feeding ($=3.97$) and Emotional Feeding ($=3.52$), while "Average" Levels of Instrumental Feeding ($=3.28$) and Control over Feeding ($=3.10$). Additionally, a great percentage of them (48.76%) reported that encouragement feeding is their dominant feeding style.

Body Mass Index of Respondents' Children

The BMI of the respondents' children was calculated by dividing an individual's weight in kilograms by the square of their height in meters. The gender-appropriate World Health Organization (WHO) Child Growth Standards were used to determine what child's category. As shown in Table 3, the vast majority of the children (83.3%) have a Normal BMI or belong within the 5th to less than 85th percentile of the WHO Child Growth Standards. A cumulative 16.7% are below and above the normal range.

Factors that predict the parental feeding style of the respondents

Using multiple regression, this study found that the independent variables considered in this investigation collectively explained 27.7% of the variance for instrumental feeding ($R^2=.277$), 25.3% of the variance for emotional

feeding ($R^2=.253$), and 20.5% of the variance of encouragement feeding ($R^2=.205$) as presented in table 4.

As to instrumental feeding, occupation ($\beta=.297$), place of residence ($\beta=.247$), living arrangement ($\beta=-.209$), number of pregnancies ($\beta=.635$), and the number of living children ($\beta=-.711$) were significant predictors of instrumental feeding. Moreover, maternal characteristics that significantly predict emotional feeding style were occupation ($\beta=.182$), number of pregnancies ($\beta=.994$), and number of living children ($\beta=-.920$). Furthermore, living arrangements ($\beta=-.336$) and the number of pregnancies ($\beta=.401$) were significant predictors of encouragement feeding.

Relationship between the parental feeding style and the child's BMI

This study establishes a significant negative relationship between encouragement feeding and a child's BMI ($r=-.158$), as shown in Table 5. Specifically, the respondents with higher encouragement feeding levels were more likely to have children with lower BMI.

Discussion

The PFSQ was used in this study to assess the feeding style of the original proponent of the scale, Wardle et al. (2002), where their respondents, in the same manner, have a high level of

Table 2. The Parental Feeding Styles of the Respondents

Feeding Styles	Mean	DR	f	%
Instrumental Feeding	3.28	Average	22	14.10
Control over Feeding	3.10	Average	12	7.69
Emotional Feeding	3.52	High	33	21.15
Encouragement Feeding	3.97	High	76	48.72
with two (2) dominant feeding styles			9	5.77
with three (3) dominant feeding styles			3	1.92
with four (4) dominant feeding styles			1	0.64
Total			156	100.00

Norm:		
Range	Item	Overall
4.21 – 5.00	Always (A)	Very High
3.41 – 4.20	Often (O)	High
2.61 – 3.40	Sometimes (S)	Average
1.81 – 2.60	Rarely (R)	Low
1.00 – 1.80	Never (N)	Very Low

Table 3. Distribution of Respondents' Children in terms of their BMI

Child's BMI	f	Percentage
Underweight	15	9.6
Normal	130	83.3
Overweight	7	4.5
Obesity I	4	2.6
Total	156	100.0

Table 4. Regression of Parental Feeding Style

Variables	Instrumental Feeding			Control			Emotional Feeding			Encouragement		
	Beta	t-value	t-prob	Beta	t-value	t-prob	Beta	t-value	t-prob	Beta	t-value	t-prob
Socio-Demographic Factors												
Age	.032	.323	.747	-.028	-.251	.802	-.090	-.905	.367	.092	.900	.370
Civil Status	-.035	-.436	.664	.028	.302	.763	-.010	-.119	.905	-.068	-.791	.430
Educational Attainment	-.017	-.186	.853	.182	1.765	.080	.016	.175	.861	.144	1.516	.132
Occupation	.297	3.305*	.001	.025	.241	.810	.182	1.987*	.049	.105	1.118	.266
BMI	.000	-.002	.999	.065	.793	.429	-.077	-1.052	.295	.016	.216	.829
Family Monthly Income	-.124	-1.304	.194	-.098	-.902	.369	-.181	-1.884	.062	-.052	-.523	.602
Residence	.247	3.218*	.002	.006	.070	.944	.135	1.730	.086	-.100	-1.240	.217
Living Arrangement	-.209	-2.703*	.008	-.010	-.114	.909	-.123	-1.569	.119	-.336	-4.136*	.000
Family Structure	-.044	-.564	.574	.017	.185	.853	-.039	-.494	.622	.113	1.376	.171
Number of Pregnancy	.635	3.441*	.001	.009	.043	.966	.994	5.294*	.000	.401	2.073*	.040
Number of Living Children	-.711	-4.171*	.000	.198	1.014	.312	-.920	-5.308*	.000	-.248	-1.387	.168
Mult R	.527			.236			.503			.453		
R²	.277			.056			.253			.205		
F-ratio	5.021*			.772			4.424*			3.383*		
F-prob	.000			.667			.000			.000		

encouragement/prompt feeding and a lower level of instrumental feeding. Comparatively, the present study differs from Wardles et al.'s findings on emotional feeding and control over feeding.

Considering that the respondents' children are toddlers, having higher levels of encouragement feeding and emotional feeding than instrumental feeding and control over feeding is understandable. Mothers of toddlers often provide prompts to child's eating, mainly because a toddler is a stage where various foods are introduced and a stage where children become picky about what they eat. Likewise, toddlers naturally have negativistic behavior and temper tantrums, addressed by mothers using food in response to a child's emotional distress. Moreover, the need to encourage their children to eat is essential on the mother's part for according to van der Horst and Sleddens (2017) parents influence toddlers' food intake through the foods they make available as well as through the way they interact with their toddlers. Since the early years are a crucial period of developing eating patterns, parents tend to

Table 5. Correlation Coefficients Between Parental Feeding Style and the Child's BMI

Parental Feeding Style	r	r-prob
Instrumental Feeding	-0.105	0.194
Control	0.060	0.456
Emotional Feeding	-0.042	0.598
Encouragement	-0.158*	0.049
As a Whole	-0.099	0.219

provide prompts on how children eat in ways they believe are apt and fitting. However, it must be highlighted that mothers encouraging their children to eat depends on the latter's health and development status. For instance, in communities where larger children are perceived as healthy and good parenting, feeding strategies are geared toward increasing the child's intake, reducing distress, and promoting weight gain.

As to emotional feeding, which respondents practice at high levels, Steinsbekk et al. (2017) stated that it is common for

parents to use food to regulate their child's distress and continue to do so because it works. They claimed that a child that is repeatedly fed when they are upset or expresses negative emotions learns that eating helps regulate such emotions; hence, it may influence the development of a child's emotional eating eventually. This assumption is supported by the findings of Rodgers et al.'s (2013) study, which reported that maternal emotional feeding influences toddlers' and preschool children's emotional eating over one year. However, as this feeding style works for parents, it must be noted that it might not be beneficial for the child in the long run. Overeating in response to emotional distress leads to children becoming overweight (Society for Research in Child Development, 2017).

Nevertheless, this study found that mothers practiced instrumental feeding at normal levels. In instrumental feeding, where food is used as a reward for good behaviors and consuming healthy foods, Raaijmakers et al. (2014) found out mothers most frequently used energy-dense and nutrient-poor foods as a reward. These foods include candy, cookies, chocolate, and ice cream. Consequentially, using energy-dense and non-nutritive foods as rewards for good behavior leads to children favoring these foods over nutrient-rich ones.

On controlling over-eating, which is evident among the respondents at average levels, this feeding style was associated with a double-edged sword effect. While this practice aims to promote proper eating behavior and healthy food choices, the results of other research studies say otherwise. For example, Rollins et al. (2014) stated that using restrictive control over feeding is counterproductive and increases the child's intake of forbidden foods, subsequently putting them at risk of excessive weight gain. Additionally, Pesch and colleagues (2020) posited that a child's internal cues to satiety are overwhelmed by overly controlling maternal feeding behaviors, which can lead to overeating and weight gain. In contrast, low control feeding behaviors increase consumption of "unhealthy" foods and risk of excessive weight gain and decrease intake of fruits and vegetables.

Regarding the predictors of these feeding styles, it was noted that these styles of feeding were influenced by various maternal factors considered in this study. Instrumental feeding, for instance, is influenced by maternal occupation, place of residence, living arrangement, and the number of living children. Another would be emotional feeding, influenced by the respondents' occupation, number of pregnancies, and number of living children. Furthermore,

encouragement feeding was predicted by the respondents' living arrangements and the number of pregnancies.

The study can pattern how mothers shape their toddlers' eating behaviors and patterns depends on their intrinsic characteristics, which operate simultaneously. While there are limited studies that investigated whether maternal intrinsic attributes are predictors of their feeding styles, Lipowska et al. (2018) claimed that most of the time, mothers are influential factors in children's eating behaviors. They reasoned that mothers were more likely to be involved in decision-making and meal preparation. Furthermore, they stated that factors that affect the mothers' and fathers' use of feeding approaches include: their own weight-related experiences, their perception of the child's BMI; their beliefs about gender-related differences in dieting; and physical attractiveness. Based on their claims, it is reasonable to think that parents' feeding styles heavily rely on internal factors or their perception of their child's health status. Yilmaz et al. (2013) stated that one of the notable factors influencing parental feeding style is the perception of the child's nutritional status by their parents.

Among the maternal factors that predict feeding styles found in this study is the maternal occupation, which predict the use of instrumental feeding and emotional feeding. This result implies that mothers with better careers or jobs often use food as a reward and to regulate a child's emotional distress. Work demands could explain this result as affects mealtime preparation. Putting consideration to the nature of the work, better jobs would often be more demanding and more toxic; hence mothers would have lesser time to prepare healthy meals and would resort to using energy-dense food as a reward and regulator of toddlers' temper tantrums. Nazzaro, Lerro, and Marotta (2018) cited that self-employed or unemployed mothers are likelier to have children eating more fruits and drinking soft drinks than employed parents whose children do not eat fruit or vegetables daily.

In the current study, the place of residence was recorded to significantly predict the respondents' instrumental feeding style. Mothers residing in a city environment would more likely exhibit using food as a reward. Living in higher capital locations such as major cities presents a wide array of food choices in which toddlers often opt for the energy-dense ones that seem more appealing to the child. Although better options for healthy and quality diets are available in cities, there might be less improvement in nutrient intake among toddlers because they prefer for less nutritive ones. It must be underscored that protein quality and nutrient density are critical to child nutrition. Hence, in instrumental feeding, mothers would be more likely

to use the child's preferred food as a reward for eating than the more nutritious ones. So, this instance can be a source of an issue. In the review of Rodgers and his colleagues (2013), they found out that maternal instrumental feeding was positively associated with the snacking behaviors of children. The food used as a reward, which is often the less energy-dense preferred by the child, would more likely be what the child will crave. Raaijmakers et al. (2014) uncovered that the use of food as a reward to the child for eating the food desired by the mother could lead to the child preferring the reward food and disliking the healthy ones overall.

Moreover, this study established that living arrangement predicts the use of instrumental feeding and encouragement feeding. Mothers living with husbands would more likely use food as a reward and provide prompts for feeding. This instance is more likely to happen as mothers and fathers would differ in how they feed their children. Although the assumption is that mothers play a more active role in feeding the child, the current environment shows that fathers are also now participating in making decisions about child feeding. Comparatively, Scaglioni et al. (2018) say that, in general, fathers would be less likely to limit access to food and monitor children's food intake. Therefore, as toddlers, children would be more inclined to eat less nutritive foods. With this, mothers tend to be encourage their children to eat healthily and use food as a reward once they eat nutritious ones.

Nevertheless, this study established maternal-obstetrical factors influencing their feeding style, which could be the strength of this study. The existing literature shows no studies about whether maternal obstetrical-related factors predict their feeding style. In this study, it was hypothesized that parity and gravidity affect the maternal feeding style. Based on regression results, the present study offers that the number of pregnancies or gravida has been found predicts the use of instrumental feeding, emotional feeding, and encouragement feeding. Specifically, mothers who were pregnant more than once were likely to exhibit the said feeding styles.

Additionally, a number of living children or maternal parity was found to predict the use of instrumental feeding and emotional feeding, particularly in those with fewer living children. A possible explanation for this significance would be maternal experience in childbearing and rearing. Multiparous and multigravida mothers are more likely to be self-assured of their feeding choice because of their experience.

The study found that maternal educational attainment does not predict parents' feeding style. However, Ayine et al. (2020)

mentioned that mothers' education plays a role in their feeding practices, as reported by some studies. The examination of Inhulsen, Mérelle, and Renders (2017) revealed that maternal education influenced the correlations between encouraging and controlling feeding styles and improvement in the child's dietary behavior, and between instrumental feeding and deterioration of the child's dietary behavior. However, not many studies have been in place to investigate the influence of maternal education on parents' perceptions, concerns, and feeding practices with child weight.

Also, the current study presents that income is not a predictor of any of the respondents' feeding styles. This result conforms to the study of Musher-Eizenman et al. (2009), which reported that income was not significantly associated with any feeding practices.

This study reports that maternal BMI is not associated with parental feeding style. However, in the study of Musher-Eizenman et al. (2009), they found that higher maternal BMI reported less encouragement.

Conversely, the present study revealed a significant negative relationship between encouragement feeding and a child's BMI. As encouragement feeding pertains to giving prompts or encouraging children to eat, this feeding style has improved a child's dietary behavior (Inhulsen et al., 2017). Therefore, in the context of a child with a lower BMI, mothers exert pressure when they perceive their child to be underweight or to have a small appetite (Webber et al., 2010). The present result is said to conform to the results of Musher-Eizenman et al. (2009), wherein they reported that maternal encouragement was related to the lower BMI of their child. Thomas et al. (2021) reverberated this claim that parents who frequently encourage their children to eat more will possibly have children who are more likely to gain weight in the future.

Nonetheless, this study found that the other parental feeding styles are non-significant with the child's BMI. For instance, on control over feeding, the non-significant result of the present study comes contrary to the findings of Rodgers et al. (2013), who found that overt control is a predictor of increased BMI among children aged 12 months.

The present undertaking also found a non-significant relationship between the emotional feeding of the respondents and their child's BMI. This result is contrary to what Rodgers and his cohorts (2013) noted: this feeding style is directly associated with the child's weight and obesogenic eating behaviors. For Braden et al. (2014), they observed that

emotional feeding was a parental factor related to a child's emotional eating, which in turn can lead to the child's gaining weight since mothers predominantly practice this feeding style with overweight children (Raaijmakers et al., 2014).

Lastly, the current study has shown that encouragement feeding has a non-significant relationship with the child's BMI. This result contradicts what Rodgers and his friends (2013) noted: prompting the child is a good predictor of weight gain over time based on inconsistent observations. They mentioned that some observations showed that maternal pressure to eat predicted a lower BMI one year later; other observations elicited an increase in a child's BMI secondary to fat intake. Some observations reveal no association with weight change or eating outcomes. These observations were based on their samples, who are children from birth to two years old and five years old.

Conclusion and Recommendations

Mothers vary in their characteristics and on their feeding styles. Based on study results, they have elevated levels of encouragement and emotional feeding and average levels of instrumental feeding and control over feeding. However, encouragement feeding is the dominant feeding style among respondents among the four feeding styles. Various maternal traits have been found to predict a specific parental feeding style except for the control over feeding subscale. Additionally, only encouragement feeding was found to indirectly correlate with a child's BMI. Based on the results and conclusions, it is recommended that: (1) health professionals are encouraged to involve mothers and other care providers in strategies that highlight maintaining a positive health status and eating behaviors such as feeding programs, operation timbang, etc.; (2) health professionals should give a mother's class to mothers and other significant others involved in food-related decision-making and activities as to the pros and cons of the manner they feed their child; (3) mothers are encouraged to record the health status of children under their care to determine appropriate interventions to address impending health predicament; (4) local health officials and professionals should conduct educational interventions appropriate to the characteristics of their beneficiaries; (5) a similar study that includes other variables other than maternal personal attributes (e.g., parents and children's eating behavior and perception of mothers to child's nutritional status) should be conducted to capture influential factors that determine maternal feeding style; and (6) a study on the feeding styles among fathers can be conducted to provide a picture of the feeding styles of the partners of mothers.

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