

childhood overweight. There is little doubt that physical activity has decreased in elementary and secondary schools in the United States. In 2010, 44% of 9th-grade students attended physical education class daily, but only 28% of 12th-grade students participated in daily physical education ([Eaton, Kann, Kinchen, et al, 2012](#)). Consequently, most of children's physical activity must occur within the family or outside of school, which is often limited due to community factors (e.g., unsafe neighborhoods). Decreased physical activity within the family is a powerful influence on children because children imitate their parents and other adults.

The growing attraction and availability of many sedentary activities, including television, video games, computers, and the Internet, have greatly influenced the amount of exercise that children get. Studies have shown the association between screen time and obesity among children ([De Jong, Visscher, Hirasing, et al, 2013](#); [Thorn, DeLellis, Chandler, et al, 2013](#)). The [American Academy of Pediatrics \(2011b\)](#) issued a policy statement encouraging parents to limit media viewing in children to 2 hours or less per day.

Psychological factors also affect eating patterns. Infants experience relief from discomfort through feeding and learn to associate eating with a sense of well-being, security, and the comforting presence of a nurturing person. Eating is soon associated with the feeling of being loved. In addition, the pleasurable oral sensation of sucking provides a connection between emotions and early eating behavior. Many parents use food as a positive reward for desired behaviors. This practice may become a habit, and the child may continue to use food as a reward, a comfort, and a means of dealing with depression or hostility. Many individuals eat when they are not hungry or in response to stress, boredom, loneliness, sadness, depression, or tiredness. Difficulty in determining feelings of satiety can lead to weight problems and may compound the factor of eating in response to emotional rather than physical hunger cues.

Frequency of family meals has consistently been shown to be a protective factor for obesity ([Hammons and Fiese, 2011](#); [Neumark-Sztainer, Larson, Fulkerson, et al, 2010](#)). Family meals tend to provide access to a variety of nutrient-rich foods, particularly fruits and vegetables. This is also a time when parents can model healthy