

Young Bites, Big Questions: Unpacking Diet and Disparity among US Children

Introduction and Research Questions

The dietary habits of children are emerging as a critical aspect of public health discourse. This project examines dietary consumption frequency in early and middle childhood (ages 0-12), where nutrition may play a pivotal role in shaping health outcomes later in life.^(1, 2) It asks:

1. What is the prevalence of unhealthy consumption among US children?
2. How are socio-economic factors associated with unhealthy consumption patterns?

Data Management

This project analysed the National Health and Nutrition Examination Survey (NHANES),⁽³⁾ featuring dietary and socio-economic data. Data management included:

Bash:

- Joining raw datasets
- Age-filter data
- Recoding missing values

R:

- Data integrity checks
- Variable creation*
- Removing extraneous columns
- Creating visualisations and a shiny app.

*Dietary questions (e.g. “In the last year, how often have you eaten *apples*?”) contained ordinal responses from 1 (“never”) to 11 (“2+ times per day”). These were grouped into fruit, vegetables or sugar and averaged to form *consumption indices*. Additionally, derived binary variables indicate whether *any* fruit/vegetable was consumed at each frequency (e.g. ‘fruit_1’ signifies *never* consuming fruit) – or, for sugar, *at least one* item at that frequency.

Visualisation Approach

First visualisation (research question one)

- Density plots: captures overarching index distribution information, utilising colour and shape for pattern perception.
- Overlapping plots: utilises ‘boundary perception’ principles for comparative analysis, highlighting differences in distribution shapes/areas.⁽⁴⁾
- Transparency effect: prevents information loss by occlusion.

Second visualisation (research question one)

- Bar chart: groups data for response comparison among extreme-consumption groups.
- Faceting by category: shifts comparative focus from *cross-* to *within*-food groups.
- Data literacy considerations:

- Y-axis fixed at '50%' to avoid overinflating prevalence through exaggerated vertical scaling.
- Direct bar labelling provides precise quantitative insight.

Shiny dashboard (research question two)

Available at: <https://sammakesapps.shinyapps.io/YoungBites/>

Designed for policymakers, this dashboard allows users to undertake advanced filtering of the data to identify vulnerable groups. Additional features focussed on ease-of-use for non-technical audiences, including:

- Use of 'natural language' for subsetting options.
- A data table to offer a more precise quantitative assessment.
- A 'variable guide' to assist interpretability.
- A colour-blindness-friendly mode to enhance accessibility, aligning with principles for inclusive visual design.⁽⁵⁾

Results

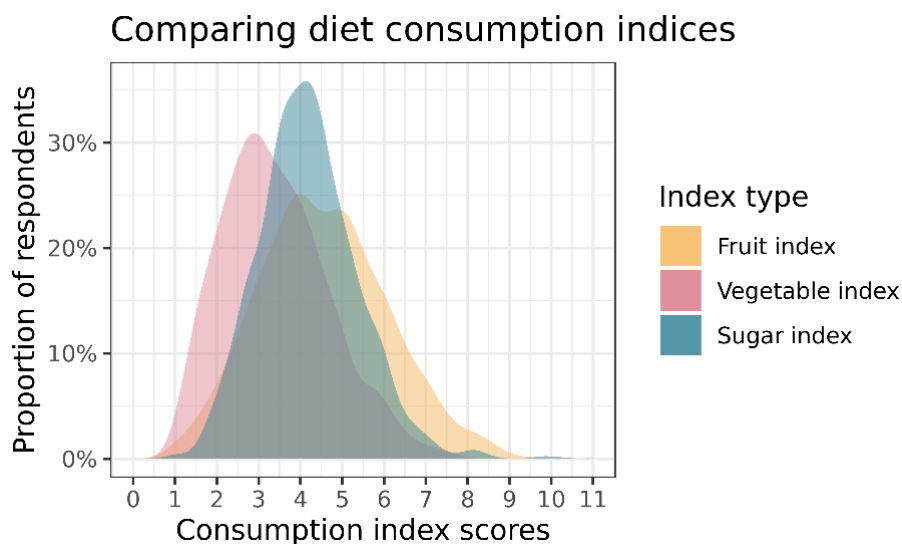


Figure 1: distribution of fruit, vegetable and sugar indices.

For sugar consumption, *Fig.1* reveals that the mode (i.e. the most commonly occurring index score) is ~4, corresponding to a frequency of “once per month”. The distribution’s right tail indicates a small segment consuming sugar far more frequently.

The vegetable index most commonly registers at ~3, corresponding to consumption frequency of just 7-11 times annually. The fruit index shows greater spread, indicating a greater mix of high and low consumption.

Fig.2 outlines the ‘extreme ends’ of consumption. Remarkably, around 1 in 50 (1.9%) of children consumed fruit no more than 1-6 times p/year – while about 1 in 200 (0.5%) abstained from fruits and/or vegetables entirely. While this data reflects consumption frequency, not quantity – and so cannot directly indicate malnourishment – these figures do imply significant deviations from federal guidelines, recommending 1-3.5 cups of fruit/vegetables *daily* for children.⁽⁶⁾

For sugar, a quarter (25%) of the sample consumed *any* high-sugar item 5-6 times weekly, with 1 in 20 (5.1%) consuming any item multiple times daily.

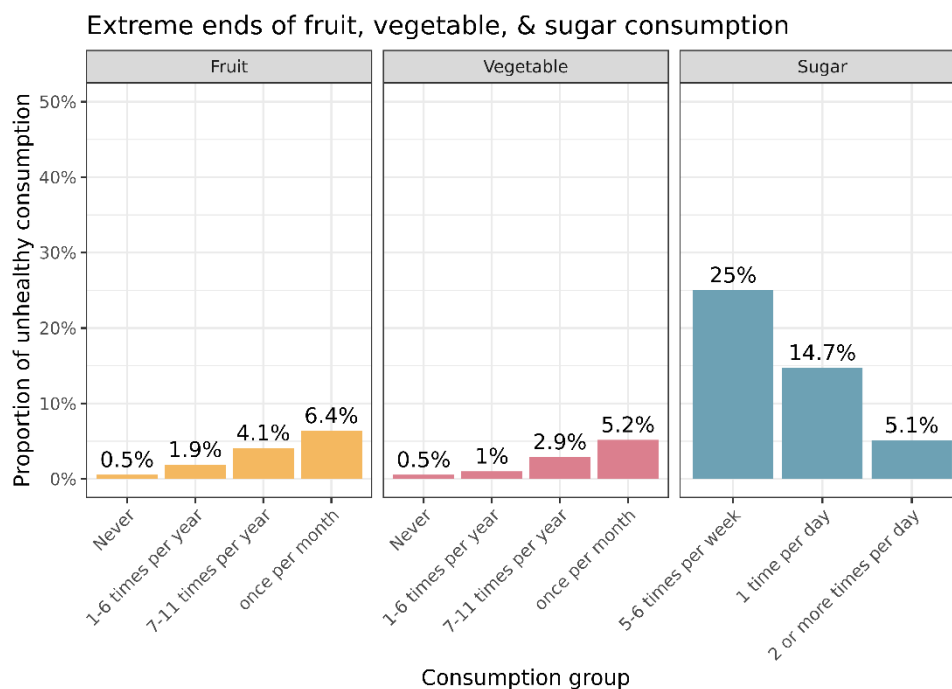


Figure 2: Proportion of respondents within 'extreme' frequency levels.

Shiny app

For brevity, this section focuses on 'age' and 'household income'.

Dashboard data indicates that low fruit/vegetable and high sugar consumption increases with age. Notably, 9% of children aged 9+ exhibit low fruit consumption ('once per month' or less often), compared to 4% and 5.8% in the 0-4 and 5-8 age groups, respectively. This indicates a potential correlation between age and unbalanced dietary choices, possibly associated with increased dietary autonomy.

Intriguingly, children in the top two income brackets have notably lower median fruit/vegetable index scores. This contrasts with pan-age studies associating lower income with less healthy food choices,⁽⁷⁾ and underscores the need for tailored approaches in dietary studies/interventions that recognise children as a unique demographic.

Furthermore, analysis of both age and income reveals children aged 9+ in the \$45,000-\$64,999 bracket show notably lower fruit/vegetable index scores – and with 14.6% and 12.5% showing low fruit/vegetable consumption, respectively. This pinpoints a specific demographic where targeted nutritional interventions could be greatly beneficial.

References

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